

# CHSAB Annual Report 2021–22

**People should be able to live a life free from harm in communities that are intolerant of abuse, work together to prevent abuse and know what to do when it happens**

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## Message from the Independent Chair

I am very pleased to introduce the Annual Report of the City and Hackney Safeguarding Adults Board 2021/22. As the Independent Chair of the Board. I am extremely grateful to all partners for their ongoing support and contributions to safeguarding people living in the City and Hackney, through the tremendous challenges from the Covid-19 pandemic. Partners have continued to deliver safe services and respond to changing safeguarding needs and risks, as the report describes. I take this opportunity to thank all staff, volunteers and residents for supporting people at risk of abuse or neglect in the City and Hackney during this time.

This annual report shows what the Board aimed to achieve during 2021/22 and what we have been able to achieve, as partners and as a partnership. It provides a picture of who is safeguarding, in what circumstances and why. This informs the priorities in the Delivery Plan for 2022/23, which states what we intend to do during this year despite the considerable pressures on partners in terms of resources and capacity. There are significant challenges, including: the ongoing impact of Covid-19 and safeguarding issues arising from the lockdowns; the impacts of the cyberattack on Hackney Council and greater levels of need in the local population.

The Board and its members continue to address the challenges in respect of safeguarding adults in the City and Hackney, find innovative ways to support residents and staff, and make improvements in the ways in which people are safeguarded. I hope to continue to chair the partnership and support colleagues to achieve the aims and ambitions of the Board.

**Dr Adi Cooper OBE,**  
Independent Chair City and Hackney Safeguarding Adults Board  
June 2022

## What is the Safeguarding Adults Board?

### Role

The City and Hackney Safeguarding Adults Board (CHSAB) is a partnership made up of both statutory and non-statutory organisations. A range of organisations attend the Board including health, social care, housing, criminal justice and fire services, voluntary sector and residents who use services in the City of London and Hackney. The role of the CHSAB is to assure itself that organisations based in the City and Hackney have effective safeguarding arrangements. This is to ensure that adults with care and support are protected and prevented from experiencing abuse and neglect.

The CHSAB has three core legal duties under the Care Act 2014:

- 1) Develop and publish a Strategic Plan outlining how the Board will meet its objectives and how partners will contribute to this
- 2) Publish an Annual Report detailing actions that the Board has taken to safeguard the community and how successful it has been in achieving this
- 3) Commission Safeguarding Adults Reviews (SARs) for any cases that meet the criteria.

In addition to this, the CHSAB is able to lead or undertake work in respect of any other adult safeguarding issue it feels appropriate to meet the objectives described in the statutory guidance accompanying the Care Act 2014.

### Membership

The CHSAB has three statutory partners: the Local Authority, Clinical Commissioning Group and Police service and a wide range of non-statutory partners.

Below is a full list of our partners and their attendance at our quarterly Board meetings during 2021/22:

2021-22	
Independent Chair	100%
London Borough of Hackney ASC	100%
City of London Corporation	100%
City & Hackney CCG	100%
Homerton University Hospital	100%
Barts Health NHS Trust	0%
East London NHS Foundation Trust	100%
London Fire Brigade	50%

2021-22	
Metropolitan Police	100%
City of London Police	50%
National Probation Service	25%
Healthwatch Hackney	50%
HCVS	25%
Age UK East London	50%
The Advocacy Project	0%
London Borough of Hackney Benefits and Housing Needs	75%
Turning Point	25%
Department of Work and Pensions	100%
Public Health	75%
Care Quality Commission	25%

## Principles

The Board's strategy and annual strategic plan is underpinned by the six safeguarding principles:

- **Prevention** – It is better to take action before harm occurs.  
*"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."*
- **Empowerment** – People are supported and encouraged to make their own decisions and informed consent.  
*"I am asked what I want as the outcomes from the safeguarding process and this directly informs what happens."*
- **Proportionality** – The least intrusive response appropriate to the risk presented.  
*"I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed."*
- **Protection** – Support and representation for those in greatest need.  
*"I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want."*
- **Accountability** – Accountability and transparency in delivering safeguarding.  
*"I understand the role of everyone involved in my life and so do they."*

- **Partnership** – Local solutions through services working together and with their communities. Services share information safely and each service has a workforce well trained in safeguarding. Communities have a part to play in preventing, detecting and reporting neglect and abuse.



*“I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”*



## Board Governance

### Subgroups

The Board has a number of subgroups in place to ensure the delivery of its annual priorities:

#### **Quality Assurance:**

This group examines quantitative and qualitative information about safeguarding across the City and Hackney. This information is provided to the Executive group and helps inform the work and priorities of the Board.

#### **Safeguarding Adults and Case Review:**

The group fulfils the Board's s44 Care Act duty by considering requests for a Safeguarding Adults Review (SAR). The group reviews referrals and makes recommendations to the Chair when it considers if a SAR is required. It will also monitor the embedding of action plans from reviews that have an adult safeguarding theme to them.

#### **Workforce Development:**

This group meets periodically to review and identify training and development opportunities in respect of adult safeguarding. It is also responsible for quality assuring the safeguarding training delivered by partners.

#### **Transitional safeguarding:**

The task and finish group is responsible for identifying how to better support young people aged 16 - 25 years old with their safeguarding needs around exploitation and abuse. This is a joint task and finish group on behalf of the City and Hackney Safeguarding Children's Partnership and Hackney Community Safety Partnership as well as the CHSAB.

#### **SAR action plan task and finish group:**

This group was designed to ensure that the actions from our most recent SARs are completed in a timely manner. The group also identified how to ensure that learning from SARs has a long-term impact on improving practice.

#### **Digital safety and financial scams group:**

The group identifies core risks associated with being online and using digital platforms. Furthermore, the group identifies how to keep residents safe online, particularly with respect to financial scams.

#### **Anti-social behaviour and safeguarding:**

This group was set up by the Safeguarding Adults Board and Community Safety Partnership in Hackney to improve the multi-agency response to people both perpetrating or experiencing anti-social behaviour. The role of the group was to ensure that a proportionate response is provided to residents as well as support frontline professionals in responding to anti-social behaviour



The work of the sub and task and finish groups is overseen by the Executive Group, whose role it is to monitor the progress of work undertaken by the groups and identify any other work the Board needs to undertake. The Executive group is attended by statutory partners, the Independent Chair and the Board Manager.

There are also quarterly CHSAB meetings attended by the whole partnership. This allows for discussions on key safeguarding issues, networking and identifying further opportunities for partnership working.

### ***City of London Adult Safeguarding Committee***

The City of London has a Safeguarding Adult Committee, which focuses on safeguarding issues affecting residents living in the City of London. The Committee meets quarterly, where it allows partners to share their responses and responsibilities in relation to different safeguarding issues and provides updates in respect of their progress against the Board's strategic priorities.

### ***CHSAB strategic links***

The CHSAB has links with partnerships and boards working with residents in the City of London and Hackney, including: the City and Hackney Safeguarding Children's Partnership, Community Safety Partnerships and Health and Wellbeing Boards. The Board also engages with other partnerships where there may be opportunities to work collaboratively or provide an adult safeguarding expertise.

## Budget

In 2021/22 the budget was £216,991 from the partners listed below:

Partners Income	Received (£)
City of London Corporation	(28,875)
East London NHS Foundation Trust	(27,500)
Homerton University Hospital	(12,000)
NHS City and Hackney CCG	(20,000)
Metropolitan Police Authority	(5,000)
Bart's and London NHS Trust	(5,000)
City of London Police	(4,400)
London Fire Brigade	(500)
LB Hackney	(104,809)
<b>Total income</b>	<b>(208,084)</b>

The expenditure for the Board in 2021/22 was £182,104. This covered costs including staff, the Independent Chair, training and design costs.

The Board have made the decision to keep the partner contributions the same on the basis that there is a current reserve of £199,396, to meet any unplanned expenditure that may be incurred in this financial year.

## Supporting the CHSAB

The CHSAB has a full-time Board Manager and Business Support Officer to manage the work of the Board.

## Case Study 1: North East London Clinical Commissioning Group

**Sophie\*** is a young woman who resides at a local nursing home. She is largely bed bound, and lacks capacity to consent to care and treatment. However, she is not resistant to care being provided. There has been a positive relationship between the care home and family, and all report that the GP is very engaged with managing her care plan.

When residents at her nursing home were routinely being offered the Covid-19 vaccine – Sophie’s family stated that they did not wish for her to receive the vaccine. As Sophie lacks the capacity to consent to treatment, the responsibility for a **‘best interest decision’** under the ***Mental Capacity Act*** lies with the CCG and the GP who manage her care arrangements. The CCG were anxious to reach a safe decision that engaged with



her families’ concerns and worked collaboratively, taking into account the significantly higher levels of Covid-19 deaths of care home residents.

The care home had done a lot of work with families to ensure that they have the information to assist in being involved in decision making where residents could not make their own decisions. This involved providing information leaflets, discussions, etc and centred upon consent to "testing" and vaccinations. The family had previously advocated for their daughter to have the flu vaccine. It was agreed that the first step should be to engage further with the family and understand the basis of their concerns. The CCG sought Adult Safeguarding advice from the Adult Safeguarding Lead at the London Borough of Hackney. Following discussions between the case manager and the family it became apparent that their objections were specific to the Astra-Zeneca vaccine, rather than the overall principle of vaccination. This was in part due to their understanding that this vaccine contained animal products that are prohibited in their faith. This understanding allowed the case manager to engage in a more personalised way with the family accepting their concerns and working in partnership. A best interest decision was taken to administer the vaccine and the family agreed with this plan.

## Case Study 2: Metropolitan Police Service

The police responded to a call from neighbours of a **Kate\***, concerned that they had not seen her at the address for some time. They also noted that there were multiple males coming and going to the property at different times of the day. Police attended and managed to confirm that Kate was safe and well but established that she was extremely fearful of the males who had attended the address. The officers were able to establish that Kate was a Class A drug user whose address had been ‘cuckooed’ by males who she had previously bought drugs from. These men, up to five in total, took over her flat and used it to deal and store drugs from. They threatened violence should she ever inform the police. Neighbourhood officers were already working in partnership with Peabody Housing to obtain a closure order for the address. Kate was safely removed from the premises, with her consent, and put up in a hotel by police. This was so that she could be away from the immediate area whilst work with the Housing association was completed to urgently re-house her elsewhere. A search of the premises located a large amount of class A drugs, cash, and a suspected firearm. Kate was safely placed away from harm and is receiving ongoing support from social services, and a criminal investigation remains ongoing into the items found and identifying suspects for prosecution.

*“I’ve got my life back.”*



## CHSAB Achievements for 2021/22

### *Safeguarding Adults Review (SARs)*

- The Board commissioned one Safeguarding Adults Review and one discretionary Safeguarding Adults Review. Both are due to be published in 2022 and will be included in the annual report for 2022/23.
- The Board held one reflection event identifying how well learning from the MS SAR was embedded into practice. The Independent Reviewer provided positive feedback on the actions Board partners had taken to address the recommendations from the review.
- The SAR action plan group measured how well learning had been embedded into practice. This undertaking feedback exercises with frontline staff and partners allows us to understand how well SARs were known and perceived across the City and Hackney.
- The SAR Protocol was updated in response to the National Analysis from SARs.
- The SAR action plan group reviewed learning from SARs across London to identify themes and how the Board can pre-emptively address these.

### *Training and engagement with professionals*

- The Board commissions a package of training for frontline line staff working across the City and Hackney on a yearly basis. This year the Board commissioned 11 different safeguarding courses, including a new course on trauma informed approaches to safeguarding. In total, 413 people attended training in 2021/22.
- The Board published monthly bulletins for frontline staff providing them with update on adult safeguarding issues.
- The Board delivered a series of bitesize training including learning from SARs and best practice working with rough sleepers.
- The Board has commissioned a new training system so that all training will be contained in one centralised location.

### *Safeguarding Adults Week*

- The Board held a number of bite-sized learning sessions on different areas of safeguarding for professionals. In total, over 200 professionals attended these session; an increase upon the previous year.
- The Board created a series of seven-minute briefings and learning resources to support frontline staff.
- A number of posters and promotional resources were circulated across all staff at the London Borough of Hackney.



## **Quality Assurance**

- The Board undertook one multi-agency case file audit which assessed safeguarding practice in respect of self-neglect. In total 10 cases were reviewed at a multi-agency event attended by Board partners and the neighbourhood team.
- Board partners audited their safeguarding training, with specific scrutiny into mental capacity training offered to staff.
- There was a review of how well the Board was meeting its statutory obligations under the Care Act 2014 and Care Act statutory guidance.
- There was one challenge event, which assessed the Board partners in relation to safeguarding priorities set out in the Safeguarding Adults Partnership Audit Tool; which is a Londonwide audit tool.
- The Independent Chair of the Board has initiated yearly check-ins for all Board partners. The purpose of these check-ins is to ensure that all safeguarding issues affecting residents are identified and addressed and to continue to improve engagement with partner agencies.

## **Multi-agency working**

- King's College London have undertaken a Communities of Practice around homelessness and self-neglect, which the Board has participated in.
- The Board supported the Domestic Abuse Intervention Service to create and promote the Intergenerational Domestic Abuse Protocol in the London Borough of Hackney.
- The financial scams and digital safety group worked to help ensure people stay safe online. The group reviewed core safety risks and will continue to raise awareness of how professionals and residents can avoid safeguarding risks.
- There was Board attendance at a number of partnership groups including the Carers Partnership Board, Death in Treatment Panel, no recourse to public funds meetings and domestic abuse work streams.

## **Financial Scams and Digital Safety Task and Finish Group**

- A small group of partners formed the financial scams and digital safety task and finish group to look at the risks for residents using digital platforms.
- The group has raised awareness of digital safety and online scams in the Board's newsletters.
- The group has directed that all future safeguarding projects review any online or digital risks that may be relevant.
- The group will continue to develop resources to assist frontline professionals and residents over the forthcoming year.

*“I'm thankful for the help and support.”*



### **Case Study 3: City of London Police**

**Leila\*** experienced domestic abuse over the years however she had never reported it to the police. Leila has three children, all known to Children's Social Care at different stages of their lives. At a strategy meeting for the youngest, Leila disclosed information about domestic abuse she was experiencing. Staff in the Public Protection Unit attempted to engage with Leila and she was allocated a specialist domestic abuse detective.

There was a violent incident at the home address, leading to Leila calling 999 and reporting the perpetrator. The VVA and officer on duty collected Leila from the address along with her youngest child and took her to a place of safety. This was the first time Leila had the courage to report the abuse she was suffering. The Police Public Protection Unit arranged emergency accommodation, with the support of social services, to ensure that Leila and her child did not have to return to the family home.

Leila's case was referred to the MARAC, which ensures that there is a multi-agency response to domestic abuse. The MARAC ensured that Leila was housed in an appropriate location. The case was referred to the Crown Prosecution Service to ensure that there was a criminal prosecution for the perpetrator.



## Case Study 4: Hackney CVS

Gio had engaged with the service for a number of years, volunteering for one of the programmes run by the service. Gio identifies as non-binary and bisexual, which has caused them to become estranged from their family due to their sexuality. They do not have settled immigration status in the UK. Furthermore, Gio has been diagnosed with high performing autism, depression and also struggles with anxiety. This has led to them have periods of suicidal ideation and they have attempted to take their own life.

Gio was receiving support from East London Foundation Trust mental health teams, their GP and a housing provider. Gio found that support from Hackney CVS (HCVS) to get them into work has been really valuable and they are now on a salaried wage. HCVS supported Gio to obtain accommodation and furniture for this.

Gio still experiences panic attacks which were exacerbated by being stopped and searched as a young black person and fears that they may be supported. However, HCVS has put in support for them, so they are able to manage these. Gio reports to feeling generally much happier in their life.



*“Due to the support I received, I was able to obtain accommodation, a place to call home.”*

### ***Anti-Social Behaviour and Safeguarding Task and Finish Group (on behalf of the Safeguarding Adults Board and Community Safety Partnership in Hackney)***

- A group of officers within the London Borough of Hackney formed the group to look at strengthening the safeguarding response to anti-social behaviour.
- The group have explored the key concerns for professionals working with people feeling and perpetrating anti-social behaviour.
- The pathways for anti-social behaviour cases have been reviewed and revised to ensure that these are accessible.
- The group explored the issue of cuckooing, where people take over the home of another person and use it for their own means, often for criminal activity. The group explored how to respond to and raise awareness of this issue.

### ***Transitional Safeguarding Task and Finish Group (on behalf of the Safeguarding Adults Board and Children's Safeguarding Partnership and Hackney Community Safety Partnership)***

- The Group has worked with the University of Sussex Innovate Project to continue to drive learning and understanding around the safeguarding risks affecting young people aged 16 - 25 years old.
- The group undertook a number of learning sessions with staff to raise awareness of what is available to support young people.
- The group developed a briefing for staff outlining how they could apply the law when supporting young people being exploited or abused.

### ***Resident engagement***

- The Board has commissioned a voluntary sector agency, The Advocacy Project, to obtain feedback from residents who have lived experience of safeguarding.
- The Board advertised for the role of Safeguarding Champion and also for volunteers to join the London Safeguarding Voices Group.
- Age UK undertook a feedback session with residents to hear their views on digital safety.
- The Board continues to publish quarterly newsletters to residents and also provided an article to the Older People's Reference Group on keeping safe over the Christmas period.

### **Neighbourhoods Team**

- The Board has continued to work collaboratively with the Neighbourhoods Team, through regular meetings and reporting back to the Board.
- The Neighbourhoods Team were involved in the Board's multi-agency case file audit.

### **Engagement and partnership work**

- The Board provided a response to the consultation undertaken by North East London Clinical Commissioning Group in relation to changes to the structure of their safeguarding teams.
- The Board expanded its professionals mailing list and networks to ensure that all professionals in the City and Hackney are up to date with safeguarding news. If you would like to join this network please contact: **chsab@hackney.gov.uk**.
- The Board delivered a number of bite-sized training sessions on different areas of safeguarding to different teams across the City and Hackney. This includes presentations to the public health teams, The Advocacy Project and the Health and Wellbeing Board.

### **National work**

- The Board contributed to the National Safeguarding Adults Board Chairs survey, which looks at the effectiveness and priorities of Safeguarding Adults Boards across England.
- Members of the Board attend a number of regional and national groups including, the London Safeguarding Adults Board, London and national SAB Chairs, London and regional SAB Manager Networks and Care and Health Improvement Partnership (Local Government Association and the Association of Directors of Adult Social Services) Safeguarding adults workstream.
- Members of the Board have presented at national safeguarding events that have occurred across England.

### **Case Study 5:**

#### **Homerton University Hospital Foundation Trust**

**Loretta** was a 90-year-old widow with vascular dementia and a number of other health issues. Loretta was normally resident in Nottingham, and she was an active member of her local church. She had a large family, with five children and an extended social network. Her daughter supported her with some tasks at home. Loretta had discussed Lasting Power of Attorney (LPA) with her daughters before she lost capacity and had given three of her daughter's this authorisation for her financial and health affairs.

Loretta suffered a severe stroke which resulted in her requiring support with all activities of daily living. It also impacted her ability to make decisions around her care.



## *Loretta receives home care from her daughters and carers*

This occurred during the Covid-19 pandemic and it unfortunately meant that visitations were restricted.

Staff determined that Loretta lacked capacity to make decisions about her discharge from hospital, specifically where she would be discharged to. In line with the Mental Capacity Act, a best interests assessment was arranged to discuss her LPA with her family. A number of discharge options were discussed for Loretta, including factors to consider with each option. Loretta's daughters had different views on where she would be discharged to.

An Independent Mental Capacity Advocate was appointed to support and establish the past and present wishes of Loretta. A social worker and discharge team, provided the daughters with care home options as well as dates for discharge. Unfortunately, it was not possible to reach a unanimous decision on Loretta's care. It was determined that it was in Loretta's best interest to be discharged to the care home with nursing attached to the Hospital. In conjunction with this, a social worker liaised with the Office of Public Guardianship and the Court of Protection.

The Court of Protection agreed that Loretta lacked capacity to make decisions about her life. She remained in the care home during the pandemic, although efforts were made to ensure her family could visit once restrictions were lifted and to ensure she had access to Christian shows and music, which she enjoyed. Staff also worked to ensure that Loretta could have a 90th birthday celebration that her family could all attend safely.

The Court of Protection eventually ruled that Loretta could return to Nottingham to be cared for in her home by her daughter and carers. The rest of the family were supportive of this decision. The manager of the care home arranged transport and a handover to staff and her daughter, so her needs were met.

## What did the Board not achieve?

The Board always sets itself an ambitious set of goals to achieve in its annual strategic plan. This is to ensure that the safeguarding adults' agenda is driven forward across the City and Hackney. Unfortunately, it is not always possible to achieve all goals. The Board was unable to meet the following objectives during 2021/22:

1. Whilst the Board has undertaken outreach work to improve its engagement with residents, it has not been possible to re-establish the service user network it had with residents prior to the Covid-19 lockdowns. The Board will continue to identify ways it can improve engagement with service users and residents in the City and Hackney.
2. In preparation for inspection by the Care Quality Commission (CQC), the Board intended to audit safeguarding within the City and Hackney's Adult Social Care teams. This did not go forward on the basis that the Board were awaiting the publication of a template for this from the CQC. This action has been rolled forward into the Board's annual strategic plan for 2022/23.
3. At the start of the financial year the Board put on a number of learning sessions for voluntary sector agencies. Unfortunately, these were not well attended, and the Board had to cancel further sessions. To address this the Board is working with its voluntary sector members to help engage with wider voluntary and community sector organisations.

## Safeguarding Adults Reviews (SARs)

The Board has a statutory duty to undertake Safeguarding Adults Reviews (SAR) under section 44 of the Care Act 2014. The following criteria must be met for a SAR:

1. An adult has died or suffered serious harm.
2. It is suspected or known that this was due to abuse or neglect.
3. There is concern that agencies could have worked better to protect the adult from harm.

The Board is also able to undertake a discretionary SAR under the Care Act 2014, where a case does not meet the threshold for a review but it is considered that there is valuable learning to be gained in terms of addressing abuse and neglect.

In 2021/22, the Board did not publish any Safeguarding Adults Reviews. The Board initiated two reviews in 2021/22, one was a SAR as defined under section 44 of the Care Act and the other a discretionary review. It is anticipated that the Board will publish these two reviews and an outstanding discretionary review in 2022/23.

## CHSAB Strategy 2020-25

Under the Care Act 2014, Safeguarding Adults Boards are required to publish a strategy outlining how it will meet its obligations in respect of adult



safeguarding. The Board renewed its Strategy in 2020 and published a five-year plan on how it will deliver its goals. The following objectives have been met in respect of the Board's 2020-25 strategy:

- We will find innovative ways to communicate key learning from the CHSAB to frontline staff across the partnership, this will include written, online and face-to-face formats.
- We will continue to run an annual Safeguarding Adults Week to help raise awareness of emerging issues with the public and frontline staff.
- We will undertake horizon scans of local, London and national safeguarding trends to help us identify thematic priorities for the Board.
- We will continue to engage with the Integration Model and Neighbourhood teams to support them in ensuring that safeguarding is embedded through all aspects of their work.
- We will continue to identify how we can work with different organisations and partnerships across City and Hackney where we have overlapping interests. This includes supporting teams to consider safeguarding in their own projects and work streams.
- We will continue to work collaboratively with the Safeguarding Children's Partnerships, Community Safety Partnerships and Health and Wellbeing Boards on mutual areas of interest.
- We will quality assure the safeguarding work of the Board's partners through our Quality Assurance Framework, undertaking the SAPAT and yearly multi-agency case file audits.
- We will identify how much impact the Board and SARs are having in improving safeguarding practice across City and Hackney.
- We will undertake periodic reviews of the Board and its Chair to ensure that it is meeting its obligations in respect of the Care Act 2014.

In the forthcoming year the Board will focus on the following priorities:

1. Engaging with voluntary and community sector organisations in a meaningful way to ensure that adult safeguarding messages are incorporated into practice.
2. Oversee The Advocacy Project in their delivery of an adult safeguarding feedback service for people with lived experience of adult safeguarding. If you have received adult safeguarding support in the City or Hackney and would like to provide feedback to this service, please contact: **chsab@hackney.gov.uk**.
3. Identifying and responding to people who are 'on the edge of care' and may not meet the criteria for statutory safeguarding intervention, but still have safeguarding needs.

4. Continuing to raise awareness of self-neglect and how to work effectively with adults who may be neglecting themselves.
5. Engaging with services across the City and Hackney to ensure that they have embedded core duties in relation to adult safeguarding.

*“My daughter is able to help me with the support she receives.”*



### **Case Study 6: East London Foundation Trust**

Anita was a 51 year old woman from the Irish Traveller community, who was diagnosed with psychosis, depression and anxiety. There were suspicions that she may have a mild learning disability and some memory loss due to heavy drinking. Anita had been known to the EQUIP team, who work with people experiencing or at risk of



experiencing their first episode psychosis, for a year. She lived with her ex-partner and daughter and had a joint tenancy with him. Her ex-partner had care and support needs of his own and was using illicit substances and drinking heavily. Anita's ex-partner had been abusive towards her. She also had a current boyfriend whom she described as being "on/off", and he was also abusive towards her. Anita's daughter helped to provide care to her and her ex-partner.

The EQUIP social worker had worked closely with Anita to understand her needs and her wishes for the future. The EQUIP social worker recognised that she was an adult at risk of domestic abuse, but her low mood and anxiety prevented her to seek support. Her circumstances meant that she was restricted in moving to alternative accommodation, and Anita also stated that she wanted to stay close to where her daughters were.

The EQUIP social worker held a professionals meetings to try and ascertain what could be done to support Anita, specifically advocating for her to move accommodation with the support of her housing association. The social worker worked with the Named Professional for Safeguarding Adults and domestic abuse team to move things forward by escalating concerns with the housing association. The EQUIP social worker also worked with the Carer's Lead to support Anita's daughter who was struggling with the demands placed on her as a carer. As a result, Anita was offered alternative accommodation with her daughter and her daughter was provided with support in her carer role.



## CHSAB Board Partners Safeguarding Achievements

This section outlines the Board Partners main achievements in relation to adult safeguarding for 2021/22:

### *London Borough of Hackney*

- Provided support to partners in relation to the roll out of Covid-19 testing and vaccination, particularly where there may be concerns in relation to the person's mental capacity to consent to vaccination or testing. This helped to ensure more people had access to testing and the vaccine.
- There have been contributions to and progress around a multi-disciplinary approach to working within neighbourhoods based around GP practices. This supports early engagement and reduces the likelihood of people having to re-tell their stories to several professionals. This was undertaken while rearranging the safeguarding team so that the response and outcomes when abuse is first reported is more proportionate and accessible for residents.
- There were a number of projects where Adult Social Care collaborated to improve outcomes for residents. This included work with colleagues in the Domestic Abuse Intervention Services to devise and implement an intergenerational domestic abuse protocol. This will assist in promoting a joint approach to situations where the victim is generally an older adult with care and support needs. There was also social work involvement in the temporary accommodation team, to further embed multi-agency working with people who are street homeless or facing eviction.

### *City of London Corporation*

- The pilot recruitment of a social worker to be based in the Homelessness and Rough Sleeping Service has been a success with an increase in related Care Act 2014 assessments, and in preventative interventions. The post has now been made permanent.
- Systems which were put in place to facilitate and monitor hospital discharges have been effective in meeting the demands created by the pandemic in terms of response times, increases in numbers of patients from a higher number of hospitals, and managing increased levels of risk.
- There has been improved partnership working which has contributed to continued improvements in multi-agency approaches to managing and reducing risk. Most notably the work alongside the Rough Sleeping and Mental Health Programme in supporting rough sleepers, and the further embedding of the Neighbourhood model of integration.

### *North East London Clinical Commissioning Group (CCG)*

NHS Improvement requested **Safe and Wellbeing Reviews**, a rapid review process for commissioners to urgently assess the wellbeing of individual's living at long-stay hospital settings. In total there were 20 reviews across

NEL CCG and 20 across the provider collaborative. This process included individuals with a learning disability who are in long-stay secure hospital placements outside of the borough. The key findings for City and Hackney were as follows:

- Actions could be taken around physical health such as obesity management and ensuring primary health checks e.g. dental checks.
- Some individuals experienced delayed discharge which tended to be related to challenges sourcing an appropriate community placement.
- In some instances the practice conducting care plan reviews remotely or virtually (due to Covid) had impacted the quality and oversight.
- The CCG undertook extensive and creative efforts to ensure that at risk populations including those who are housebound were offered and administered the Covid-19 vaccination with urgency.
- Following a comprehensive review of current services in primary care; the CCG and Public Health agreed to combine resources to commission a new enhanced Early Identification Domestic Abuse Service. The early identification service aims to provide secondary prevention of domestic abuse for all residents of the City of London and Hackney.

### ***Homerton University Hospital NHS Foundation Trust***

- The relationship between Homerton Hospital and Adult Social Care, in particular the Deprivation of Liberty Safeguards team, Integrated Discharge team and the Police has improved.
- There was an increase in staff training and awareness raising sessions. This includes the launch of a safeguarding adults level 3 as part of the induction process for staff.
- There has been working across acute and community sites to raise awareness on the safeguarding agenda. This includes providing face-to-face support to patients and service users and supporting them to make their own decisions.

### ***East London Foundation Trust***

- The Trust continued to ensure that adults were safeguarding throughout the pandemic despite significant pressures on mental health services. Trust reporting systems have been developed to help capture the nature of abuse affecting residents with mental health needs. This has enabled senior staff to identify specific training that is required for practitioners, for example domestic or financial abuse.
- The Trust has rolled out quarterly safeguarding supervision across services based in the City and Hackney. This is delivered by the Named Professional for Safeguarding Adults and allows frontline staff the opportunity to seek advice and guidance on safeguarding.



## Case Study 7: City of London Corporation

There were on-going concerns regarding the self-neglect of **Asif** who moved across different local authority areas. The concerns led to a section 42 safeguarding enquiry being undertaken by the City of London and the case was allocated to the specialist rough sleeper social worker.

A number of cross boundary meetings were held with other Local Authorities, including legal teams, to share ideas and best practice. There were regular check-ins with legal teams to make sure that all legal options and thresholds to meet our duties to Asif were considered. Throughout periods of cold weather, a temporary accommodation was booked for him, even if he did not indicate that he would come inside. This was so that there was always a self-enclosed option for them. The street cleansing team undertook weekly visits for a period to support Asif and minimise health risks arising from rotting food and vermin.

Mental capacity assessments were completed by a lead professional in a collaborative way, for example, a joint assessment was undertaken around a decision to decline housing offers, the social worker organised meetings with Psychotherapist and Community Psychiatric Nurse to discuss the assessment and get his views. A social worker completed weekly visits with Asif to try and establish trust, understanding, and compassion. A number of creative options were considered for Asif from temporary accommodation to placement in a residential care home. All these options considered what his goals were and how he wanted to live their life.

*Asif case was allocated to a specialist, rough sleeper social worker*



### **Metropolitan Police Service**

- Police in Hackney achieved the highest sanctioned detection rate for domestic abuse across the Metropolitan Police Service. This stood at 16.2% for 2021/22.
- The Police were able to maintain a business as usual approach during Covid-19.
- The Police delivered and oversaw an effective Multi-Agency Risk Assessment Conference (MARAC) supporting those who are at highest risk of domestic abuse. The MARAC adopted a holistic approach to the safeguarding risks that arose during the MARAC.

### **City of London Police**

- Funding was secured for a Mental Health Triage nurse for 2021/22. The nurse has facilitated a decrease in the need to invoke section 136 of the Mental Health Act, which gives police emergency powers to take someone from a public place to a place of safety.
- A Vulnerable Victim Advocate has been recruited until 2023; the Advocate supports victims of domestic abuse, sexual violence and fraud, as well as undertaken engagement work with outreach services.
- A Violence Against Women and Girls (VAWG) action plan has been developed which has informed and filtered across all areas of the City of London Police's work.

### **Hackney CVS**

- Hackney CVS continues to address the issue of race inequality through all its work; this includes challenging agencies and policy makers across Hackney to consider race equality in their work.
- On-going support has been provided to the voluntary sector to help them improve their safeguarding practice. This includes the delivery of training for the workforce and the promotion of safeguarding policies and practice.
- Hackney CVS has raised awareness of how sectors can improve engagement with young people who may be treated differently due to their age, race or background. In particular, the work of the Account group has strived to improve relations between the police and young people with safeguarding needs.



*“My link worker kept me updated and outlined the options available to me.”*

### Case Study 8: London Borough of Hackney

An adult safeguarding concern was received from the local Drug & Alcohol Dependence Service to alert the adult safeguarding team of a possible “cuckooing” situation involving one of their service users, **Samuel**. Samuel had informed the service of people using his property to use and circulate drugs and was limiting his access to the accommodation. Samuel stated that although he wanted this to end, he was extremely anxious about possible repercussions, and wanted any subsequent actions to be at a pace that was agreed by him.

The referring agency had begun to establish Samuel’s wishes and his vulnerability, including his ability to address the situation themselves. The team initially concluded that Samuel was able to make his own decisions and that there was a plan in place to deal with the current situation which suited his needs. Samuel also stated that he was happy for the drug and alcohol worker to advocate for him at any upcoming meetings.

Further concerns were received regarding Samuel. This led to a multi-agency meeting which included the drug and alcohol team, adult social care, safer neighbourhood team, housing and police, to discuss options for him.

The drug and alcohol worker discussed the potential options with Samuel, who initially stated that he wanted a full closure order to help him. A time frame was agreed, and alternative accommodation was sourced which was then shared with him.

These plans were disrupted after neighbours alerted police to the fact that Samuel had not been seen for a couple of days, which they thought was unusual. Staff undertook a visit to the property, which led to the implementation of the previously agreed support plan. Samuel was facilitated to move into emergency accommodation, provided with a support plan and his property was closed by the Safer Neighbourhood Team.

Samuel reported that his experience with services was positive, although he identified that the temporary accommodation did not have the basics due to him leaving his home at short notice. This was taken on board by agencies who will be incorporating this into a forthcoming multi-agency protocol. Samuel also commented on the value of having one link worker who was able to provide updates and outline the options available to him.



## **Age UK**

- There has been a focus on preventative work to support adults, and there have been a number of examples where Age UK have achieved positive outcomes in supporting people.
- There has been an increase in calls made to carers to check on their welfare and wellbeing.
- Work was undertaken to support residents, who required it, to join video meetings. This enabled the team to get better insight into their unspoken circumstances.

## **The Advocacy Project**

- Staff within the organisation continue to raise safeguarding alerts and provide support for people through safeguarding enquiries. Safeguarding training has helped increase the depth of understanding amongst the advocates of what constitutes safeguarding. The quality of support to people experiencing abuse has improved with advocates providing a more holistic approach across different legislation. This is notable in terms of supporting people who experience abuse alongside their acute mental health support needs.
- The team continues to strive to create dynamic professional working relationships across the borough. This helps ensure that professionals have multiple ways to seek support from advocates to support Hackney residents. The professional relationships built by the advocacy team result in referrals and support for people experiencing abuse being often made direct to the advocates on the frontline; this is notable in referrals from the Homerton Hospital and adult social care teams. The online / telephone referral process helps ensure that people experiencing abuse and professionals supporting them have timely access to advocacy support.
- Advocates have continued to build upon their skills and their understanding of the local community. This helps ensure that issues are picked up on and responded to, alerted, and escalated appropriately. Working in a person-centred way with individual clients but having a great understanding of the community issues means that over the year there was a need to raise over 60 safeguarding alerts by advocates on behalf of those experiencing abuse / at risk of abuse.

## **Turning Point**

- The rough sleeper project has utilised the rough sleeper multi-disciplinary partnership meeting to discuss risk and safeguarding cases allowing the formulation of joint risk assessments and care plans for vulnerable rough sleepers.
- Opiate substitute prescribing can be included in a monthly depo form; which has been a treatment option for people with memory or and mobility issues reducing trips to pharmacies or missing appointments.

- Turning Point ensures that Specialist teams and workers reflect the diverse community and endeavour to meet needs of vulnerable adult service users.

### ***London Borough of Hackney Benefits and Housing Needs***

- The Benefits and Housing Needs Service led the Everyone In programme for the protection of rough sleepers and those at risk of homelessness in response to the Covid-19 pandemic to save lives. At its peak, the project had secured accommodation, food, support and health care for 219 vulnerable residents with multiple and complex needs, including 44 individuals with no recourse to public funds. The accommodation was provided for two years and provided regular testing and health screening and Covid-19 vaccinations and a larger range of health interventions.
- The service made a successful bid to the Government's RSAP funding prospectus totalling £1.7m to deliver more, newly refurbished self-contained temporary and supported accommodation for rough sleepers.
- Our primary frontline response to rough sleeping is delivered through the Street Outreach team (SORT). In 2020/21, the Hackney SORT service assisted 350 rough sleepers; 47% of which were non-UK nationals. Despite the significant increase in the annual rough sleeper numbers, Hackney has maintained low levels of street population through early intervention and a coordinated support and housing offer.

### ***City and Hackney Public Health team***

- Partnership work has been undertaken with Change Please and the Driving For Change initiative. This is an innovative and disruptive approach to tackling homelessness, that brings direct intervention for those in need. Using revamped London buses as a delivery site, Rough sleepers are given first-hand access to GP consultations, a mobile dentist, showers and haircuts on board, all of which are valued services for vulnerable homeless people. The bus is sited in Hackney Central (near the Hackney Empire) on Thursdays and in Dalston (Gillett Square) on Fridays.
- Hackney is one of the leading boroughs in London in ensuring that our homeless residents are vaccinated to protect them from Covid-19. 67% of the people experiencing homelessness in Hackney are now fully vaccinated. This incredible achievement in supporting clinically vulnerable homeless residents to access covid vaccinations places Hackney as the 4th highest in London. This vaccination rate has been achieved despite the significant challenges that all too often mean that the homeless population do not access the medical care they need.
- Two social events were held at the Greenhouse with free food, clothing, haircuts, housing advice, smoking cessation support, drug and alcohol advice, Streetvet advice and treatment, which acted as an encouragement to also receive a flu jab and Covid-19 vaccination.



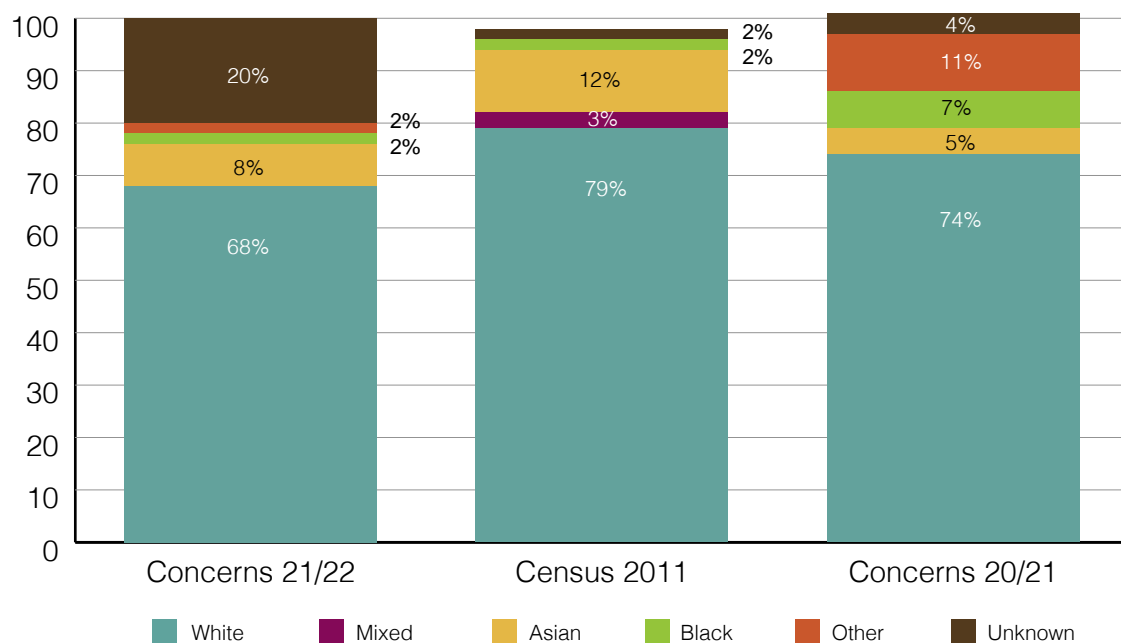
## Safeguarding data for 2021/22

The safeguarding data for 2021/22 is presented separately for the City and Hackney. This data is submitted to NHS Digital’s Safeguarding Adults Collection, which collects statutory returns on safeguarding.

### City of London

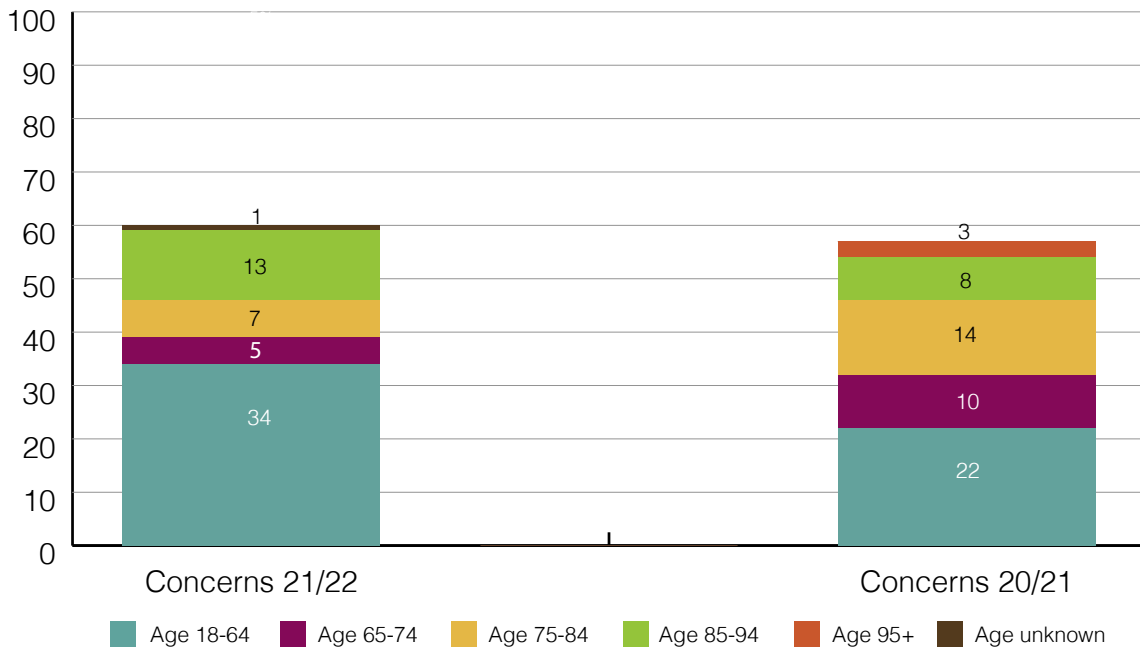
- 60 safeguarding concerns were raised
- 33 of the concerns led to Section 42 Enquiry
- Of the 35 concluded cases 27 were asked about their desired outcome, of which 18 expressed their desired outcomes. Of the 18 people that expressed 17 had their desires fully or partially achieved
- 19 repeat concerns whereby 14 individuals accounted for this cohort

### Concerns by ethnicity



This data should be reviewed with some caution given that a fifth of residents did not disclose their ethnicity. In 2021/22, 68% of safeguarding concerns started were from “White” ethnicity, which is slightly lower than the 2011 City of London census breakdown. 8% of safeguarding concerns were for people from a “Asian / Asian British” background, which is a slight increase from 2020/21, where concerns accounted for 5%. This information is anticipated given that people from an Asian and Asian British background account for the second largest ethnic group in the City of London.

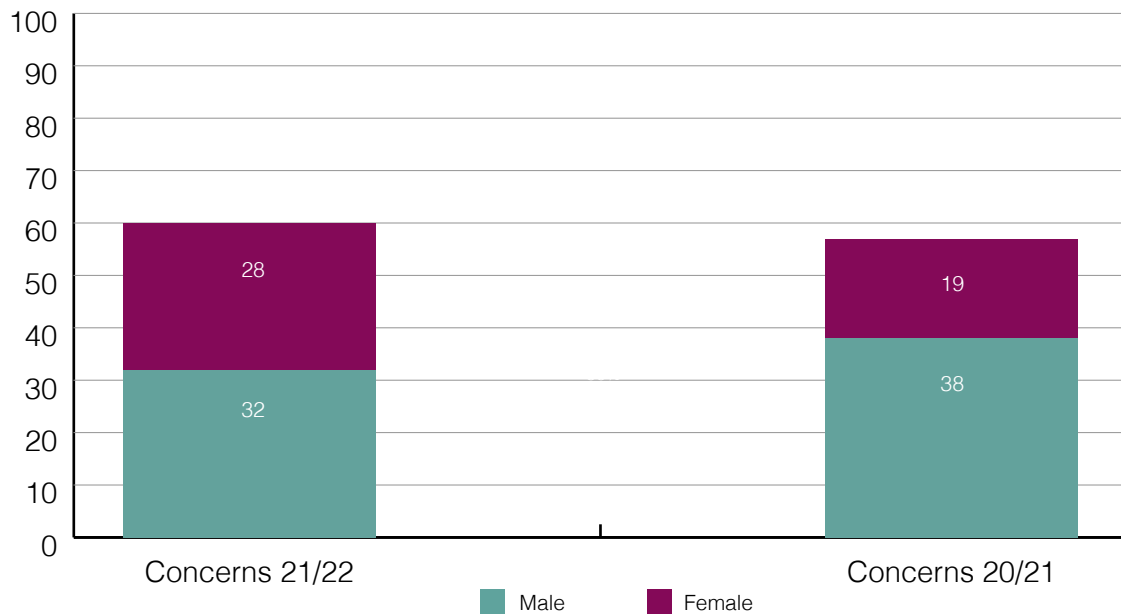
### Concerns by age



The majority of safeguarding concerns were for people aged 18-64 which was also the case during 2020/21. This was followed by people aged 85-94 whereas last year it was followed by people aged 75-84. The increased number of younger people aged 18-64 years with safeguarding concerns is thought to be linked to homelessness and rough sleeping. This trend is also apparent in last year's data. Prior to 2019/20 those aged 65 or over made up a larger proportion of safeguarding concerns.

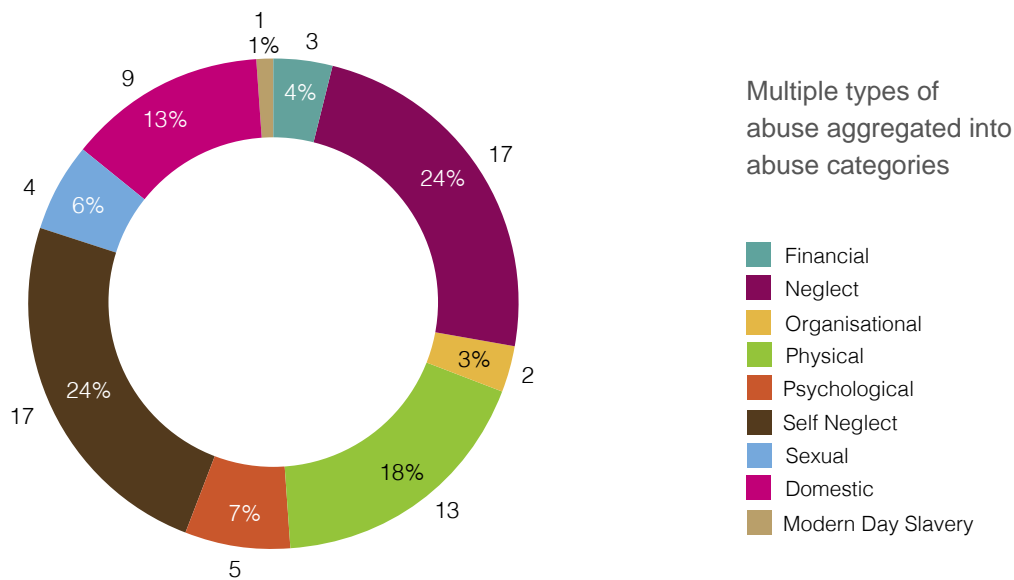


### Concerns by gender



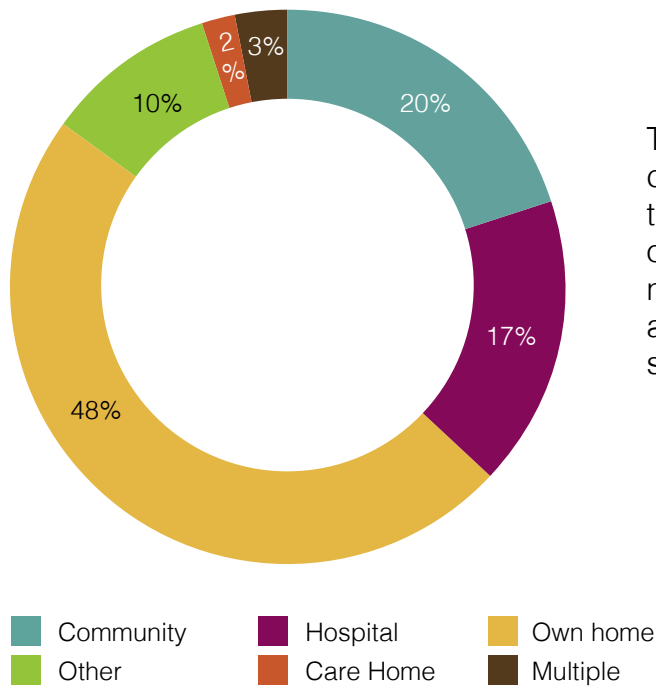
There were a similar number of males and females that were reported into adult safeguarding. This is consistent with national data obtained in NHS Digitals Safeguarding Adults Collection (SAC) which show that the number of safeguarding concerns for females and males are broadly the same.

### Concerns by type of abuse



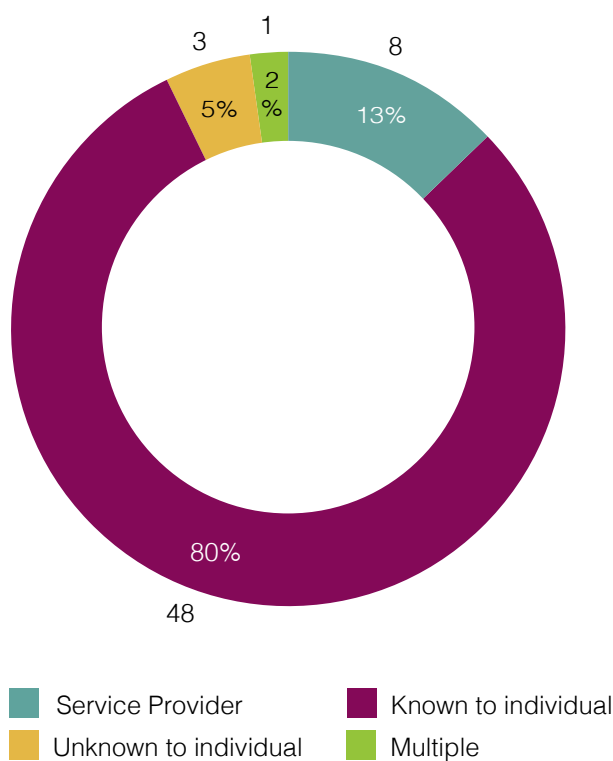
The most common form of abuse was evenly split between self-neglect and neglect and acts of omission. The number of domestic abuse concerns being reported into the City of London also continues to increase accounting for 13% of the concerns. Financial abuse continues to decline, this could be due to better awareness of scams. Alternatively, it may be that since the Covid-19 pandemic there could have been an increase in different types of abuse, such as self-neglect.

### Concerns by location of risk



The majority of safeguarding concerns related to alleged abuse that happened in the person’s own home. This is consistent with national data which identifies that abuse typically happens within someone’s own home.

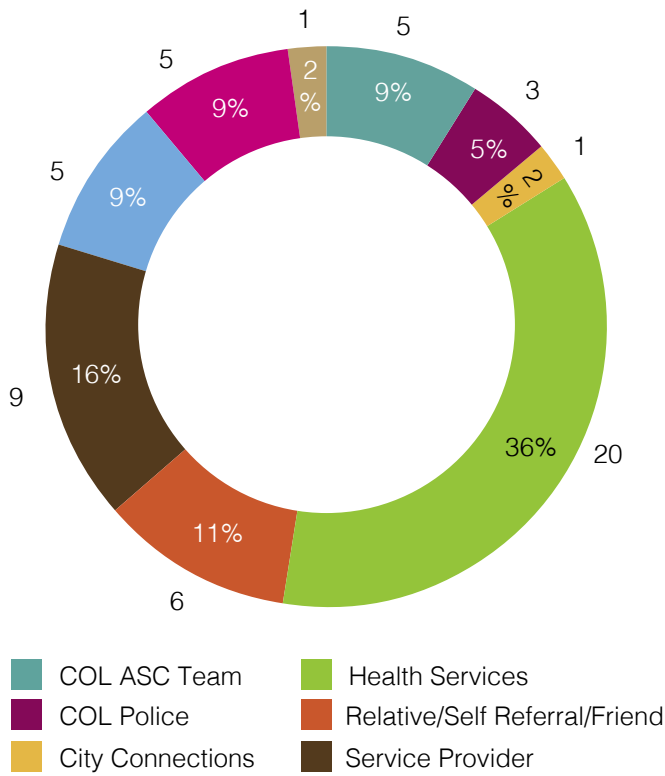
### Concerns by source of risk



In line with previous years and national data, the overwhelming source of risk was someone known to the individual.

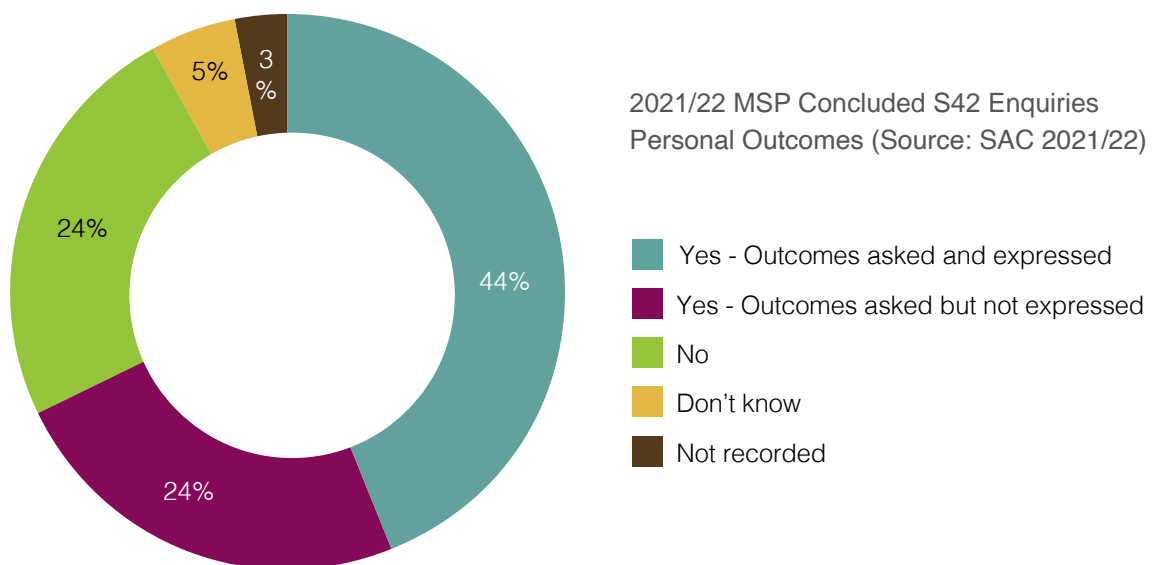


### Source of referral



The top three sources of referral were from health services, the City of London Corporation and from service providers. Other referrals included concerns being reported in by the Home Office and London Fire Brigade. It is positive to see a wider range of agencies refer concerns into the City of London Adult Safeguarding.

### Making Safeguarding Personal



In total 68% of people were asked about their desired outcomes, of which 95% had their desires either fully or partially met. This represents a lower figure than the previous year and this is likely to be due to challenges with the current

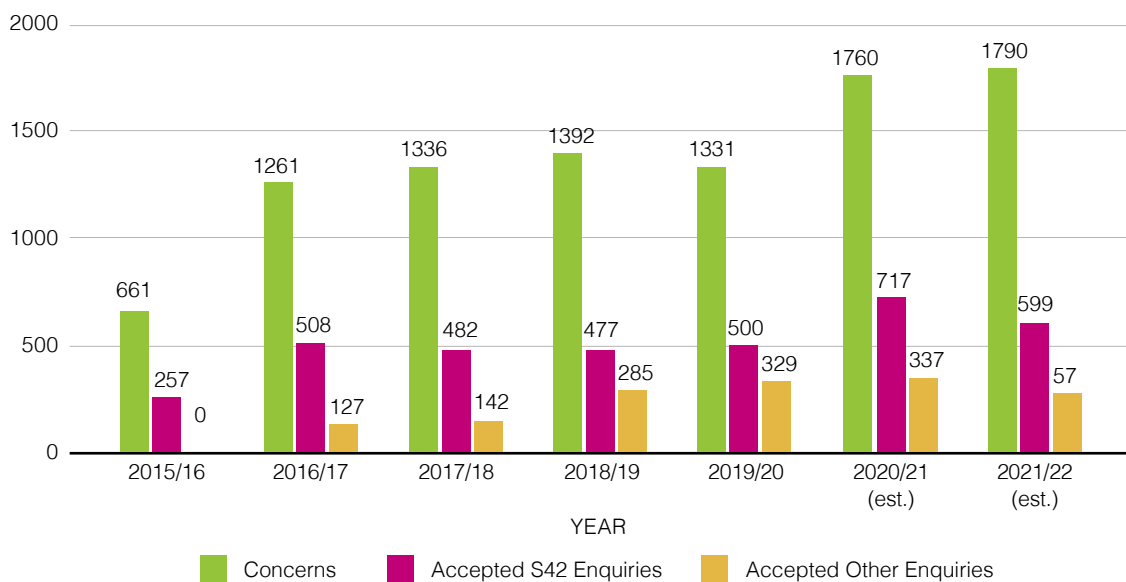
reporting system. The data system continues to be refined and the data around Making Safeguarding Personal will be monitored to see whether there has been any changes to the way this is being delivered.

### London Borough of Hackney

In last year’s annual report, the London Borough of Hackney was unable to provide a full set of safeguarding data due to the impact of the Cyberattack. This year it is possible to deliver a full data set for Hackney, however it is important to note that whilst efforts have been made to ensure the data is as fully accurate as possible there should be some caution exercised when reviewing figures. This is due to an interim system being used which could cause some duplication in figures.

### Concerns by source of risk

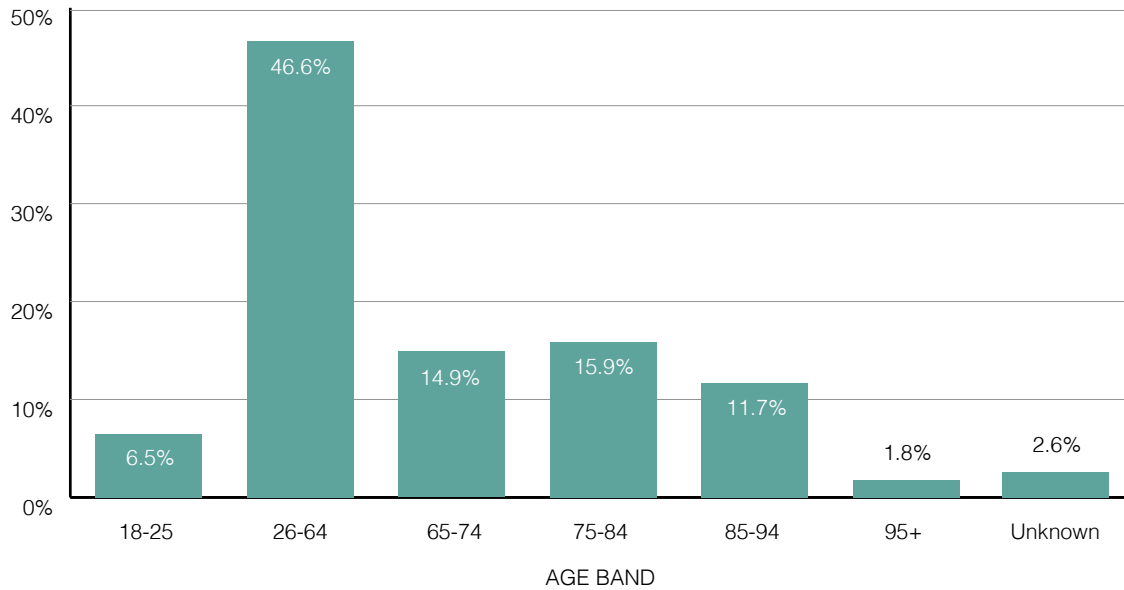
Total number of Safeguarding Concerns and Enquiries, 2015 to 2022



The data should be reviewed with a level of caution due to the on-going impact of the cyberattack affecting the London Borough of Hackney. The general trend shows that there have been an increase in the number of concerns being referred to adult safeguarding. There have generally been more cases that have met the criteria for section 42 enquiry over the past year; although the figures have reduced in the past year, this may be due to more accurate data capture. The Board will continue to monitor this over the course of the year.

## Age

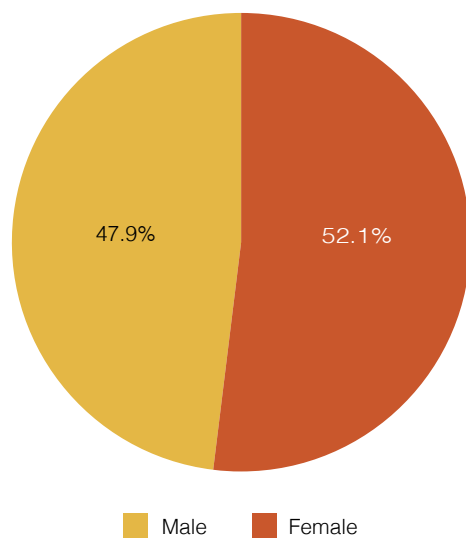
### Proportion of Concerns by Age Band



The data shows minimum change in profile from previous years, with the highest amount of concerns being raised in respect of residents aged 26 - 64 years old. Over half the recorded concerns relate to people under the age of 64 years old, which is in contrast to the national picture of safeguarding, captured by NHS Digital’s Safeguarding Adults Collection, which highlights that abuse is typically experienced by older adults. The reason for this is likely to be due to the younger demographic based in Hackney, which has a lower proportion of older adults in comparison to other Local Authorities across England.

## Gender

### Proportion of Concerns by Gender

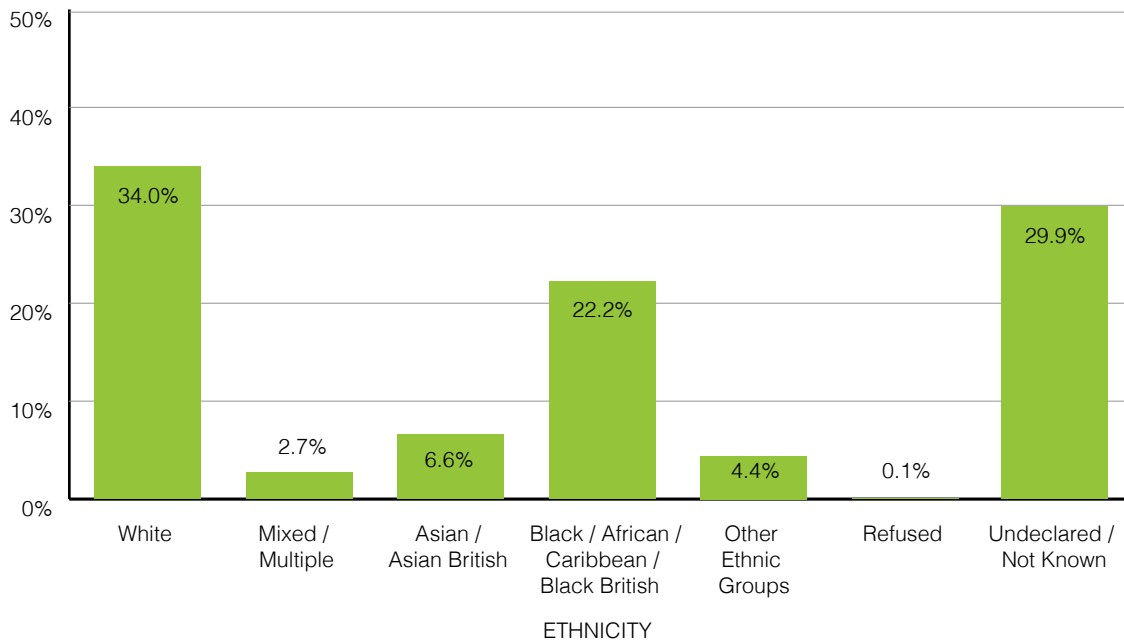


There is a slightly higher number of females referred into adult safeguarding in comparison to males. This is consistent with the 2021 census for Hackney<sup>1</sup> which highlights there are more females living in the Borough and therefore there is an expectation that there would be a slightly higher proportion of safeguarding referrals for females.

<sup>1</sup><https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationandhouseholdestimatesenglandandwalescensus2021>

## Ethnicity

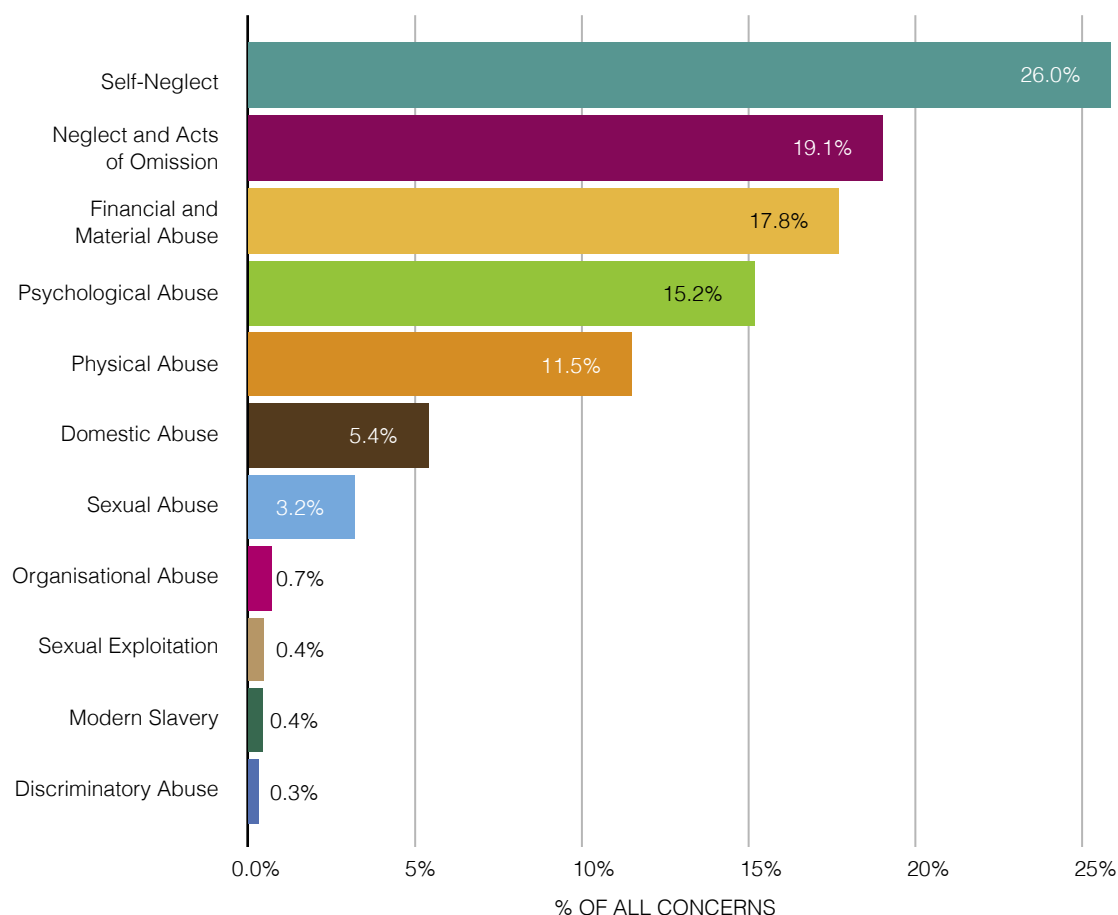
Proportion of Concerns by Ethnicity



Due to the cyberattack and lack of access to case management software capturing accurate data around ethnicity continues to prove challenging. Whilst it is positive to see an increase in data captured around ethnicity, in nearly a third of all concerns no information was obtained. The data that is available shows that most concerns continue to relate to adults from a White or Black African, Caribbean, or British background. This is consistent with the profile of Hackney, whereby people from a White or Black African, Caribbean or British background make up most of the population.

## Forms of abuse

Proportion of Concerns by Type of Risk

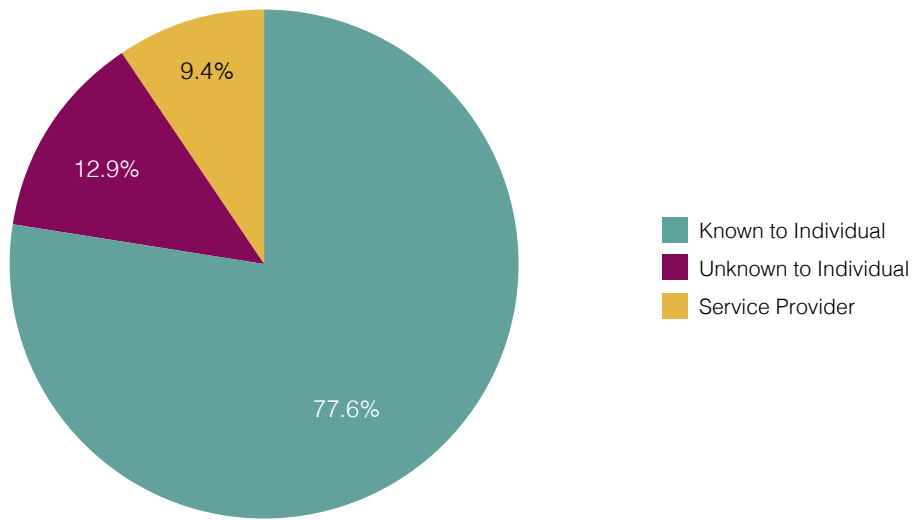


Self-neglect continues to be the most common form of abuse reported into adult safeguarding as a concern. This data is interesting as it is in some respects at odds with the SAC Collection, which collects safeguarding data across England, which recognises that neglect and acts of omission as the most common form of abuse. It is important to note that self-neglect is the fastest growing form of abuse in England. It is positive to see that after extensive awareness raising and focus on self-neglect there are more people being referred into Adult Safeguarding with concerns regarding self-neglect. Addressing the underlying causes of self-neglect and how to support residents who self-neglect continues to be a priority for the Board in 2022/23. Further information on the profile of self-neglect in Hackney can be found at page 44

The prevalence of other forms of abuse remains broadly consistent with previous years. Neglect and acts of omissions have overtaken financial abuse as the second highest form of abuse. The Board will continue to review trends over the forthcoming year to assess whether there are any specific safeguarding trends arising as a result of the long-term impacts of Covid-19 and the economic recession.

## Source of risk

Proportion of Concerns by Source of Risk

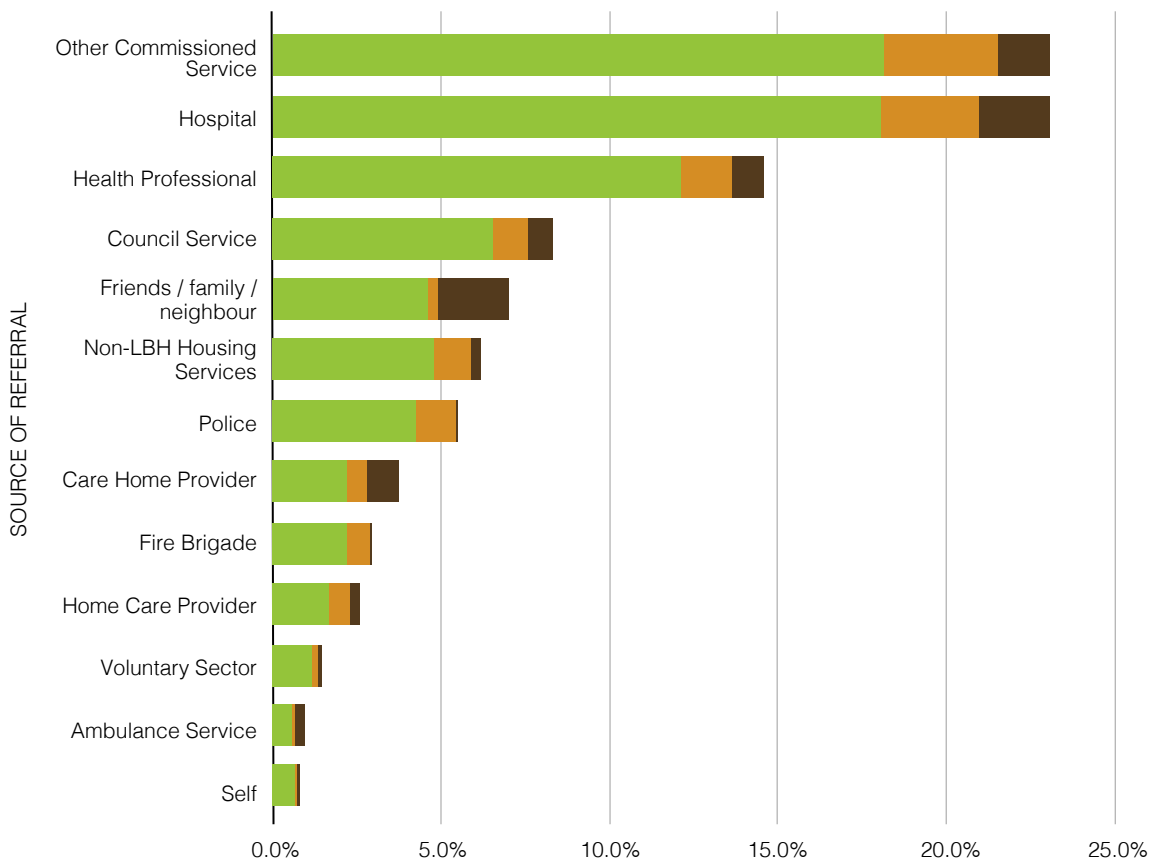


The data shows that the source of risk is most likely to be someone known to the individual, which makes up nearly 77% of the concerns referred into Adult Safeguarding. This is consistent with national data captured in the SAC collection which shows that the perpetrator of abuse is most likely to be someone known to the person. There has been a significant increase in the service provider being identified as the source of risk, from 4% in 2020/21 to 9.4% in 2021/22. This is not considered as an area of concern for the Board, on the basis that the figures for 2020/21 were exceptionally low compared to the usual figures for Hackney. The source of risk data for 2021/22 is consistent with the national figures around this.



## Source of referral

Proportion of Concerns by Source of Referral and Source of Risk

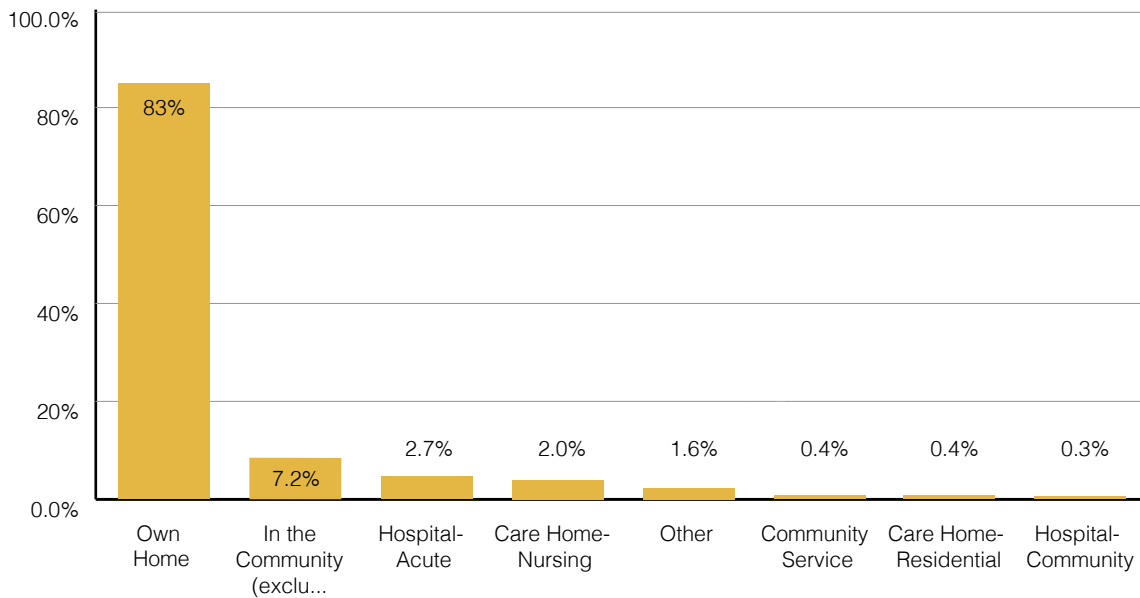


There has been a significant increase in the number of safeguarding concerns reported to be from an ‘other commissioned service’, overtaking hospitals, health professionals and the police. The recording system for adult safeguarding has been reviewed and from April 2022 there will be a more detailed breakdown of the ‘source of referral’ which will help the Board better understand which agencies are referring concerns into the Adult Safeguarding.

It is positive to see an increase in safeguarding referrals from friends and family. The Board will continue to work with residents and community groups to build awareness of adult safeguarding across the City and Hackney.

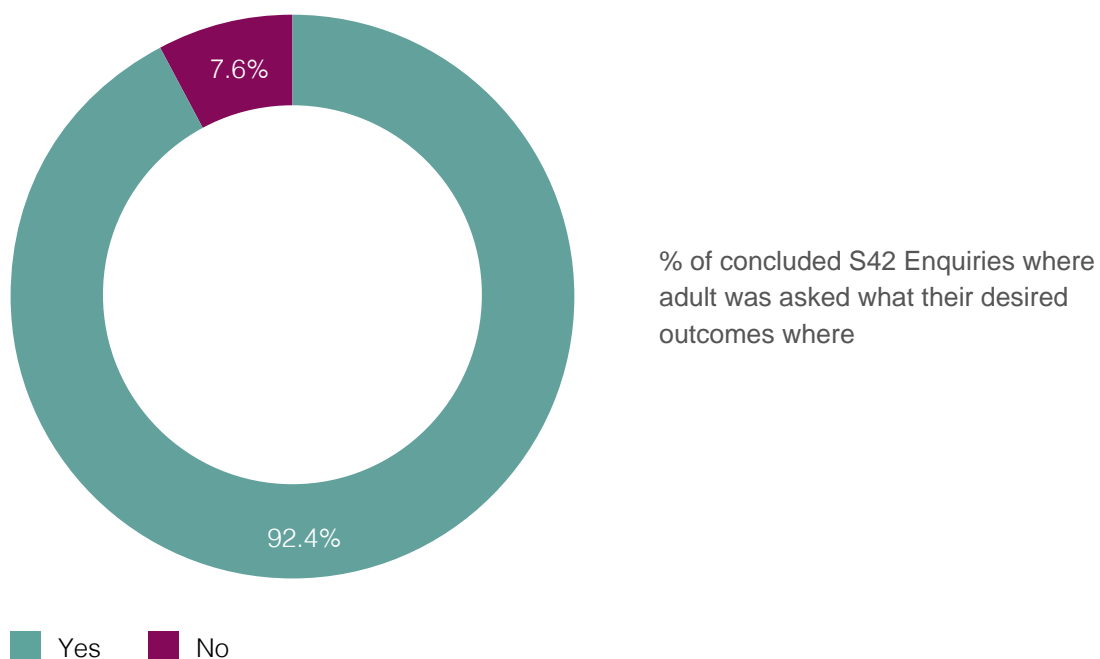
## Location of risk

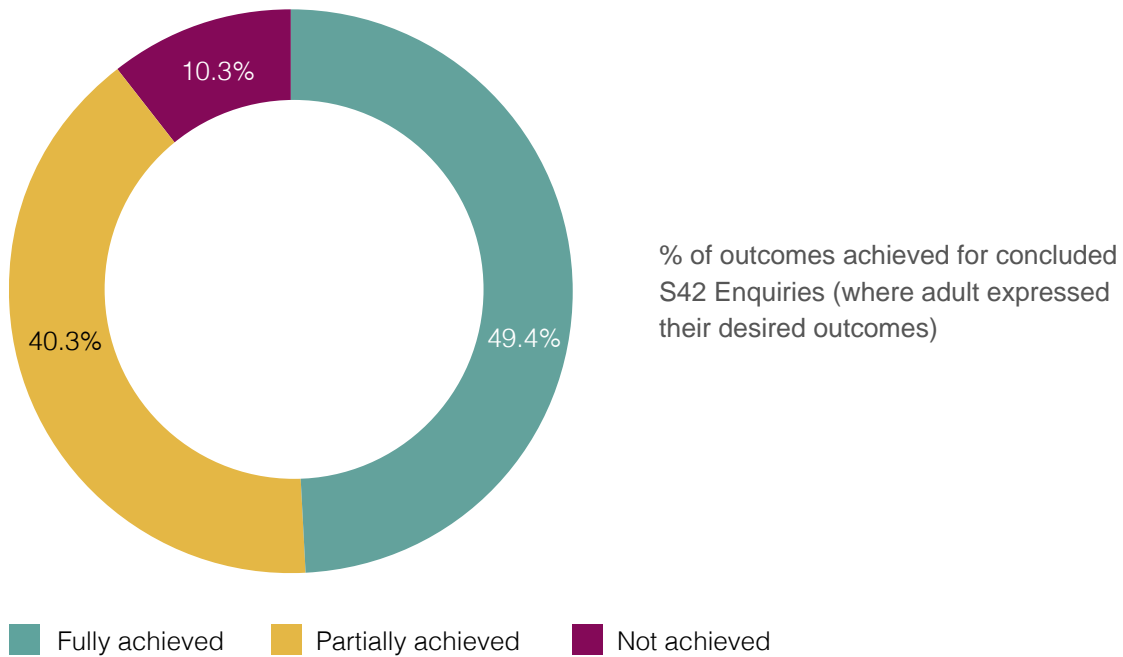
### Proportion of S42 Decisions by Location of Risk



The data continues to show that most abuse occurs within the home. The figures for abuse within the own home continue to grow and this is likely to be a knock-on impact of the increase figures in relation to self-neglect, as most/all cases will occur within the own home. There is no data in relation to abuse occurring within mental health hospitals; this is due to East London Foundation Trust’s data not being included in data as a result of recording differences between the Trust and London Borough of Hackney.

## Making Safeguarding Personal





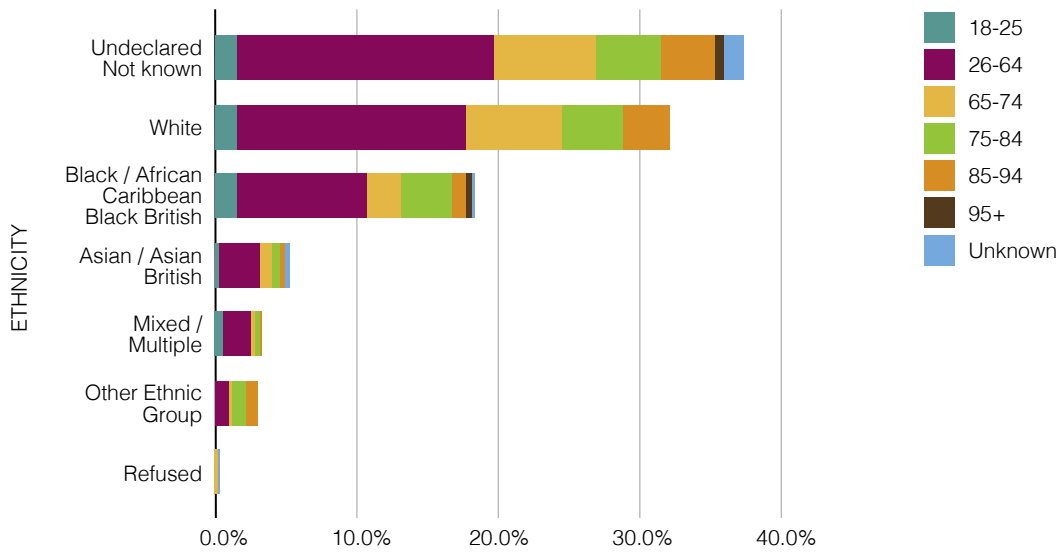
It has been possible to collate Making Safeguarding Personal data for 2021/22. This information is helpful to help ensure that safeguarding is person-centred and the process focuses on the wishes and needs of the individual.

The data shows that nearly 93% of people were asked about their desired outcomes. Of which, nearly 90% had their desires either partially or completely met. This is consistent with previous data. It is noted that some people are unable to express their desired outcomes therefore the Board would not expect to see 100% of residents expressing their wishes in relation to the safeguarding process.

This year it has been possible to evaluate whether people felt safer and involved in the safeguarding process. The rates of people being asked this is lower, however the data shows that an overwhelming majority of those involved in safeguarding felt safer and involved in the process.

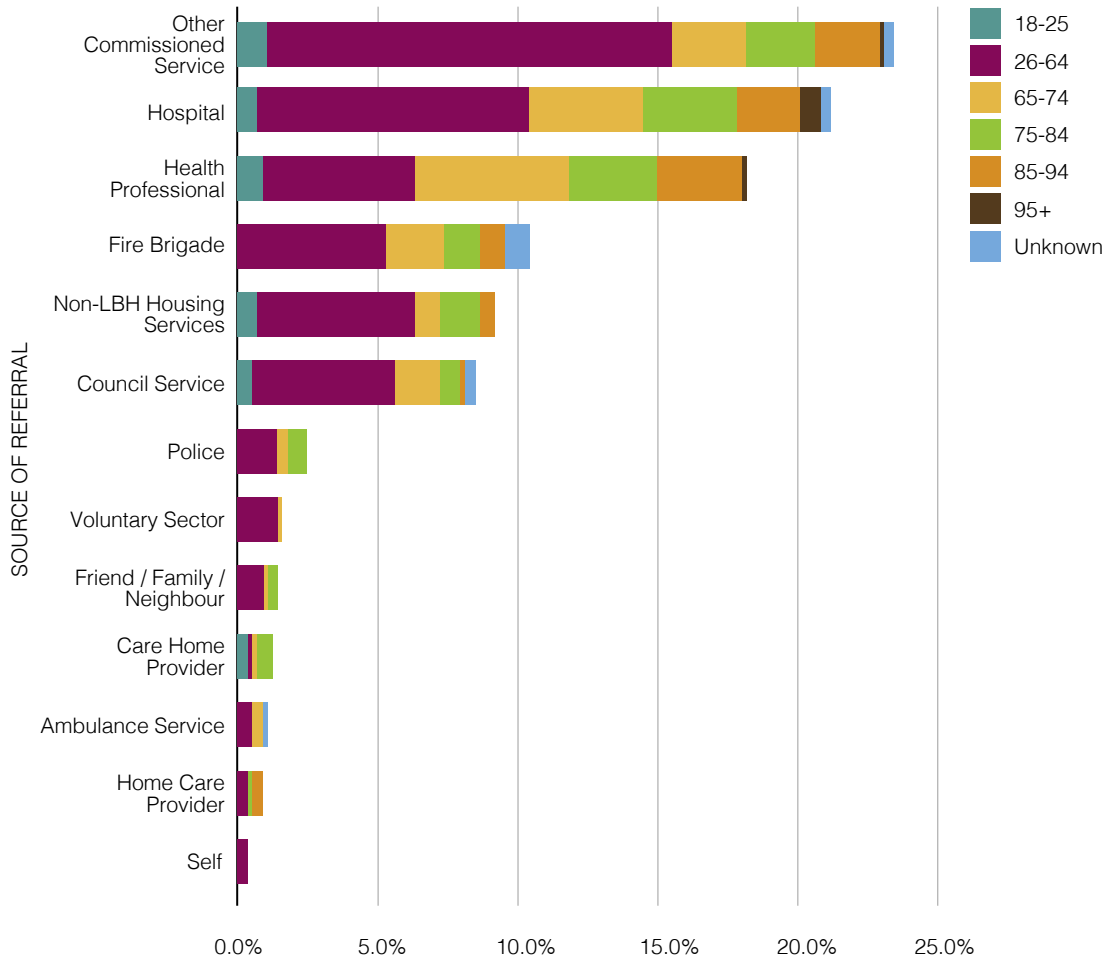
## Self-neglect data

Proportion of Concerns by Ethnicity and Age Band



The data shows that people from a white background aged between 26 - 64 years old are more likely to be referred into adult safeguarding in respect of self-neglect. There are also proportionately high rates of self-neglect amongst the 65 - 74 age group as well. This data needs to be interpreted with a level of caution given that ethnicity was not recorded in many cases, therefore a full picture of the links between self-neglect and ethnicity are not clear.

**Proportion of Concerns by Source of Referral and Age Band**



It is positive to see that there is a wide range of professionals referring self-neglect cases into adult safeguarding, this includes self-referrals and referrals from friends and family. The data shows that most concerns are reported from health although there are relatively high proportions of concerns being reported from the London Fire Brigade too. The Board will continue to explore the issue of self-neglect and continue to refine our response to this as a Borough.







# Appendix A:

## CHSAB Annual Strategic Plan 2021-2022

# CHSAB Annual Strategic Plan 2022 – 2023

The CHSAB Plan addresses the six core principles contained in the CHSAB's Strategy for 2020 – 2025

Partner	Lead	Partner	Lead
London Borough of Hackney (LBH)	Helen Woodland	City of London Corporation (CoL)	Andrew Carter / Chris Pelham
City and Hackney CCG (CCG)	Diane Jones / Mary O'Reardon	Hackney Metropolitan Police (MPS)	Marcus Barnett / Daniel Rutland
City of London Police	Anna Rice	Homerton University Hospital Foundation Trust (HUHFT)	Breeda McManus / Jennie Wood
Barts Health NHS Trust	Claire Hughes	East London Foundation Trust (ELFT)	Dean Henderson
London Fire Brigade (City of London and Hackney)	James O'Neill	Age UK	Larissa Howells
National Probation Trust	Stephanie Salmon	Department of Work and Pensions	Laura Anderson
Healthwatch Hackney	Jon Williams	Healthwatch City of London	Paul Coles
Hackney CVS	Saqib Deshmurkh	The Advocacy Project	Judith Davey
London Borough of Hackney and City of London Public Health	Andrew Trathen	London Borough of Hackney Housing	Jennifer Wynter
Turning Point (substance misuse service)	Jude Unsworth	City and Hackney Safeguarding Children's Partnership	Jim Gamble
Older Person's Reference Group	Cynthia White	City of London Commissioning	Ian Jarman
Commissioning LBH	Zainab Jalil	City of London Housing	Liam Gillespie

Sub-group	Chair	Task & Finish Groups	Chair
SAR & Case Review	Chris Pelham	Transitional Safeguarding (joint group with Community Safety Partnership & Children's Safeguarding Partnership)	Dr Adi Cooper
Quality Assurance	John Binding		
SAR Action Plan Group	Mary O'Reardon		
<b>Sub-Committee</b>	<b>Chair</b>		
City of London	Dr Adi Cooper	Safeguarding and Anti-Social Behaviour	Dr Adi Cooper

Principle 1: Proportionality - “I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed.”				
Priority	Action	Lead	Intended Impact	Update
<p><b>1. To continue to raise awareness in relation to mental capacity, including seeking assurance from partners on preparing their staff for the introduction of the Liberty Protection Safeguards. Please see section 6 on self-neglect for aligning actions.</b></p>	<p>1.1 LPS Leads in the City and Hackney Adult Social Care will provide assurances to the Board that they have appropriately prepared for the introduction of LPS. This includes responding accordingly to any national issues and staff are trained to</p>	<p>LPS Leads</p>	<p>1. The Board is confident that practitioners can exercise their duties in relation to LPS</p> <p>2. Residents in the City and Hackney will have appropriate LPS arrangements in place.</p>	
	<p>1.2 LPS Leads will work in partnership with Childrens’ Services and the Safeguarding Childrens’ Partnership to ensure that staff are appropriately trained in relation to mental capacity and understand how LPS will apply to their services.</p>	<p>Head of Adult Safeguarding / LPS Project Lead</p>	<p>1. The Board is assured that all 16 - 17 year olds that require a LPS are provided with this</p> <p>2. That there are effective transitions of young adults on an LPS into adult services</p>	
	<p>1.3 The workforce development leads will review training content in relation to mental capacity, to ensure that it provides practical approaches to responding to complex issues relating to mental capacity.</p>	<p>CHSAB Manager / Head of Adult Safeguarding City of London and London Borough of Hackney</p>	<p>1. There is assurance that mental capacity training gives staff practical advice on how to apply the Act and key learning around mental capacity</p>	

Priority	Action	Lead	Intended Impact	Update
			2. There is more support offered to residents who have fluctuating or lack executive capacity.	



Principle 2: Empowerment - “I am asked what I want as the outcomes from the safeguarding process and this directly informs what happens.”				
Priority	Action	Lead	Intended Impact	Update
2. To engage with the community and voluntary sector to support them to build their confidence in delivering their safeguarding duties and raise awareness of adult safeguarding	2.1 The Hackney CVS and the Board Manager will work together to expand the Boards reach into the community, including: <ul style="list-style-type: none"> <li>a. Meet with senior management teams in Hackney CVS to develop a strategy for engagement with voluntary sector groups</li> <li>b. Set up a regular forum to discuss adult safeguarding with voluntary and community groups</li> <li>c. Undertake promotional work with voluntary and sector groups to raise the profile of the Board</li> </ul>	CHSAB Manager / HCVS	<ol style="list-style-type: none"> <li>1. Voluntary sector services will feel more empowered to support residents with their safeguarding needs</li> <li>2. There will be an increase in intelligence from voluntary sector services being referred back to the CHSAB</li> <li>3. There will be an increased awareness of the adult safeguarding and the CHSAB across voluntary sector services in the City and Hackney</li> </ol>	
	2.2 The Board will recruit and train a new cohort of Safeguarding Champions to raise awareness of safeguarding across the community.	CHSAB Manager / HCVS	<ol style="list-style-type: none"> <li>1. There will be a Panel of Champions who are able to deliver safeguarding pre-sentations across the City and Hackney</li> </ol>	

<b>Principle 2: Empowerment...</b>					
<b>Priority</b>	<b>Action</b>	<b>Lead</b>	<b>Intended Impact</b>	<b>Update</b>	
			<p>2. There will be increased awareness of adult safeguarding amongst residents in the City and Hackney</p> <p>1. The voluntary sector will feel more empowered to provide adult safeguarding support.</p> <p>2. The Board will receive assurances that adult safeguarding is being delivered effectively amongst the voluntary sector</p>		
	<p>2.3 To create a suite of resources to help voluntary sector agencies deliver and audit their safeguarding duties</p>	<p>CHSAB Manager / HCVS / The Advocacy Project / Age UK</p>			
	<p>2.4 The Board will create a feedback loop with voluntary sector staff and volunteers so that safeguarding issues and intelligence can be routinely shared with the Board.</p>	<p>CHSAB Manager / HCVS / The Advocacy Project / Age UK</p>	<p>1. There will be a better understanding of the safeguarding issues affecting residents in the City and Hackney</p> <p>2. There will be increased engagement with the Board's work and resources</p>		
	<p>2.5 Healthwatch will invite the Board to contribute to a selection of their reviews of health services in the London Borough of Hackney to assess practice in relation to adult safeguarding.</p>	<p>Healthwatch</p>	<p>1. There will be better understanding of how well adult safeguarding is embedded operationally across</p>		

Priority	Action	Lead	Intended Impact	Update
			<p>organisations in the City and Hackney</p> <p>2. The Board will have increased intelligence on adult safeguarding issues in the City and Hackney</p>	
<p><b>3. To continue to embed engagement with people with lived experience and ensure that they can influence all aspects of the Board's work</b></p>	<p>3.1 The Advocacy Project will deliver the Lived Experience of Safeguarding Service, obtaining feedback on people's experiences of safeguarding. As part of this, the organisation will be required to provide quarterly feedback on the delivery of the service.</p>	<p>The Advocacy Project</p>	<p>1. The Board will be able to identify how to improve adult safeguarding services for residents</p> <p>2. The Board will be able to ensure that safeguarding services are person centred</p>	
	<p>3.2 The Board Manager will work with corporate communications teams to set up a system of yearly consultation to ensure that residents in the City and Hackney are given the opportunity to influence the work of the Board.</p>	<p>CHSAB Manager / London Borough of Hackney corporate teams/ City of London Corporation</p>	<p>1. The Board's annual strategic plan will reflect the needs and concerns of residents within the City and Hackney</p>	

Principle 3: Prevention - “I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”				
Priority	Action	Lead	Intended Impact	Update
<p>4. To identify and respond to the needs of people who are at the ‘edge of care’ and may not have safeguarding needs that meet the criteria for section 42(2) safeguarding</p>	<p>4.1 To audit concerns that do not reach the criteria for a s42(2) Enquiry under the Care Act 2014 to identify whether there are any particular groups that are ‘at the edge of care’ to be a focus for preventative support</p>	<p>London Borough Hackney Adult Social Care / City of London Corporation Adult Social Care</p>	<p>1. The Board will better understand which groups require support in terms of prevention 2. The Board will be able to identify key priorities for future years</p>	
	<p>4.2 To horizon scan which groups may be at high risk of falling through the gaps between services and identify actions that can be taken to better support these groups</p>	<p>Quality assurance sub-group</p>	<p>1. The Board will better understand which groups require support in terms of prevention 2. There will be better support in place for those people who are high risk of There will be better support in place for those people who are high risk of safeguarding 3. There are less people being referred into safeguarding services at ‘crisis point’</p>	

Priority	Action	Lead	Intended Impact	Update
	<p>4.3 To develop a pathway for people who may have safeguarding needs but are not eligible for support under s42(2) of the Care Act 2014 so that frontline staff know how to support this cohort.</p>	<p>Quality assurance sub-group</p>	<p>1. There is more equitable access to safeguarding services for all residents                      2. Professionals will have a better understanding of how to apply legislation around the Care Act 2014, therefore leading to greater compliance with statutory duties</p>	
	<p>4.4 To review what support is being offered to informal carers, particularly in circumstances where carers assessments have been refused, and identify how to improve safeguarding support offered to them.</p>	<p>Quality assurance sub-group</p>	<p>1. There is better support offered to informal carers and there is an increased understanding amongst informal carers on what support is available to them</p>	



**Principle 4: Partnership - “I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”**

Priority	Action	Lead	Intended Impact	Update
<p><b>5. To work collaboratively with agencies and partnerships across the City and Hackney to respond to the safeguarding needs of residents.</b></p>	<p><b>5.1</b> The Transitional Safeguarding Task and Finish Group will continue to deliver the transitional safeguarding action plan on behalf of CHSAB, the Safeguarding Children’s Partnership and Community Safety Partnerships across City and Hackney .</p>	<p>Transitional safeguarding T&amp;F group</p>	<p>1. There will be an improved safeguarding response to young adults in the City and Hackney</p> <p>2. The work will build trust amongst young people and statutory organisations</p>	
	<p><b>5.2</b> The Anti-Social Behaviour and Safeguarding Task and Finish Group will continue to develop a multi-agency response to both victims and perpetrators of ASB who have safeguarding needs.</p>	<p>Anti-social behaviour and safeguarding task and finish group</p>	<p>1. Practitioners will have a better understanding of how ASB is linked to safeguarding</p> <p>2. There will be improved interventions for people who have safeguarding needs and also exhibit anti-social behaviour e.g support will be offered at an earlier stage.</p>	

Priority	Action	Lead	Intended Impact	Update
	<p>5.3 The Board will review Modern Day Slavery work undertaken in the City and Hackney and identify further actions to address this issue in terms of both prevention and support for victims.</p>	<p>Modern Slavery Leads for City of London Corporation / London Borough of Hackney</p>	<ol style="list-style-type: none"> <li>1. Safeguarding will inform prevention work and decrease the need for people to receive safeguarding support in the long-term</li> <li>2. Professionals will have a better understanding of their duties in respect of supporting victims of modern slavery</li> </ol>	
	<p>5.4 The Board will continue to review online safety and access to digital platforms with particular focus of ensuring equity of access to services for those not using digital platforms</p>	<p>Online scams and digital safety task and finish group</p>	<ol style="list-style-type: none"> <li>1. Professionals routinely consider online and digital safety in their care planning.</li> <li>2. Residents will be aware of online safeguarding risks and how to protect themselves from these</li> <li>3. There are assurances that residents who do not use digital platforms are not excluded from accessing support and safeguarding services</li> </ol>	

<b>Principle 4: Partnership...</b>				
<b>Priority</b>	<b>Action</b>	<b>Lead</b>	<b>Intended Impact</b>	<b>Update</b>
	<p>5.5 The Safeguarding Adults Board, Safeguarding Children's Partnership and Domestic Abuse Service will develop a Think Family Approach Protocol and establish a task and finish group to embed the principles of Think Family</p>	<p>Safeguarding Adults Board Manager / Head of Adult Safeguarding / Professional Advisor for the Safeguarding Children's Partnership / Domestic Abuse Intervention Service</p>	<p>1. Professionals routinely consider the needs of all key family members when managing a safeguarding case</p> <p>2. There is evidence of collaborative working between adults and children's services</p>	
	<p>5.6 The Board will work with the London Borough of Hackney and the City of London to ensure that safeguarding issues arising from the economic crisis are identified and addressed.</p>	<p>Executive Group / Poverty Reduction Strategy Leads</p>	<p>1. Safeguarding influences the Poverty Reduction Strategy</p> <p>2. The Board is aware of arising issues relating to the economic crisis and puts tools in place to mitigate this risk.</p>	
	<p>5.7 The Board will work with the Sexual Violence Lead at East London Foundation Trust to update the Board's Sexuality and Consent Guidance and raise awareness of this topic</p>	<p>QA Sub-Group / East London Foundation Trust</p>	<p>1. There are assurances that safeguarding concerns relating to sexual consent and violence are reported and responded to appropriately</p>	

Priority	Action	Lead	Intended Impact	Update
	<p>5.8 The Independent Chair will review partners contributions to the Board and will identify how key roles (e.g. chairing task and finish and sub-groups) can be evenly distributed amongst partners</p>	<p>Independent Chair of the Safeguarding Adults Board</p>	<p>1. The work of the Board is evenly distributed across Board partners and strategic priorities meet the needs of all partners.</p>	

Principle 5: Protection - “I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”				
Priority	Action	Lead	Intended Impact	Update
6. To support frontline professionals to respond to complex issues relating to self-neglect.	6.1 The Board will review any recommendations made by King’s College London Communities of Practice on self-neglect and homelessness, allocate actions to partners and review progress accordingly .	Independent Chair of the Safeguarding Adults Board	<ol style="list-style-type: none"> <li>1. There is a better understanding across the partnerships on how to support people who experience self-neglect</li> <li>2. There will be improved interventions for people who have safeguarding needs and also exhibit anti-social behaviour e.g support will be offered at an earlier stage.</li> </ol>	
	6.2 The Board Manager will promote the Board’s resources available to support staff to respond to cases involving self-neglect.	CHSAB Manager	<ol style="list-style-type: none"> <li>1. Professionals are given the tools to ensure that they can effectively support residents experiencing self-neglect</li> <li>2. There will be improved outcomes for people experiencing self-neglect</li> </ol>	

Priority	Action	Lead	Intended Impact	Update
	<p>6.1 A working group of Board partners will develop a toolkit to support staff to respond to self-neglect and mental capacity issues. This toolkit will bring together existing tools as well as new tools such as good practice case studies.</p>	<p>Adult Social Care London Borough of Hackney &amp; the City of London Corporation / East London Foundation Trust / Turning Point / North East London CCG / London Fire Brigade</p>	<ol style="list-style-type: none"> <li>1. There will be better outcomes for people who self-neglect</li> <li>2. Self-neglect is detected and disrupted at an earlier stage</li> </ol>	
<p><b>7. To deliver and implement recommendations that arise in relation to both local, regional and national Safeguarding Adults Reviews</b></p>	<p>7.1 Independent SAR Reviewers will complete and publish learning for two Safeguarding Adults Reviews that have been commissioned by the Board.</p>	<p>SAR sub-group</p>	<ol style="list-style-type: none"> <li>1. The Board will be able to evidence that it meets its statutory obligations effectively</li> <li>2. Learning from reviews will help drive the improvement of adult safeguarding practice across the City and Hackney.</li> </ol>	
	<p>7.2 A roundtable review will be undertaken into fire deaths that have occurred in the London Borough of Hackney to assess how future fire deaths can be prevented.</p>	<p>SAR sub-group</p>	<ol style="list-style-type: none"> <li>1. There will be assurances that professionals understand fire safety risk and how to manage this effectively</li> <li>2. There will be a reduction in fire related deaths in Hackney</li> </ol>	



<b>Principle 5: Protection...</b>				
<b>Priority</b>	<b>Action</b>	<b>Lead</b>	<b>Intended Impact</b>	<b>Update</b>
	<p>7.3 The SAR sub-group will review learning from national and regional SARs and LeDeR reviews to identify whether there is any learning that can be applied to the City and Hackney specifically any learning that has arisen from the Cawston Park Safeguarding Adults Review</p>	<p>SAR sub-group</p>	<p>1. The Board will be able to evidence that it meets its statutory obligations effectively</p> <p>2. There is less risk that the same safeguarding concerns will arise in the City and Hackney</p>	

Principle 6: Accountability - “I understand the role of everyone involved in my life and so do they.”				
Priority	Action	Lead	Intended Impact	Update
8. To ensure that all agencies across the City and Hackney deliver their core duties in relation to safeguarding	8.1 The Board to undertake a Making Safeguarding Personal temperature check with all partners	QA sub-group	<ol style="list-style-type: none"> <li>1. MSP has been embedded into practice properly</li> <li>2. The Board can identify areas where MSP needs to be strengthened</li> </ol>	
	8.2 London Borough of Hackney Adult Social Care will undertake a self-assessment of adult safeguarding across their service in preparation for the forthcoming Care Quality Commission assurance regime	London Borough of Hackney Adult Social Care / City of London Corporation London Borough of Hackney / Executive Group	<ol style="list-style-type: none"> <li>1. The Board will understand how well adult safeguarding is being embedded into practice</li> <li>2. There will be an action plan identifying how to improve the adult safeguarding response to residents</li> </ol>	
	8.3 The Board will raise awareness of the different roles and responsibilities of partner agencies whose core duties are not delivering statutory duties.	East London Foundation Trust / Metropolitan Police Service/ City of London Police Service / Housing teams / Turning Point	<ol style="list-style-type: none"> <li>1. Professionals will have better awareness of who can provide support where adult safeguarding may arise</li> <li>2. There is clarity on who should lead</li> </ol>	

<b>Principle 6: Accountability...</b>				
<b>Priority</b>	<b>Action</b>	<b>Lead</b>	<b>Intended Impact</b>	<b>Update</b>
	8.4 The Board will promote a safeguarding first approach across the wider City of London Corporation and London Borough of Hackney to raise awareness of adult safeguarding and duties around this.	CHSAB Manager / Central Learning and Development team London Borough of Hackney and the City of London Corporation	<p>on and be involved in managing adult safeguarding enquiries</p> <ol style="list-style-type: none"> <li>1. Professionals outside Adult Social Care will understand their duties in respect of adult safeguarding</li> <li>2. Adults experiencing abuse or neglect will be identified and supported at an earlier stage</li> </ol>	
	8.5 To deliver a series of learning sessions on the law relating to safeguarding, specifically ensuring that this is practical in nature to help build confidence in understanding legislation.	CHSAB Manager / London Borough of Hackney/ Assistant Director, Quality Assurance, Safeguarding and Workforce Development / Head of Service ASC City of London Corporation/ London Borough of Hackney	<ol style="list-style-type: none"> <li>1. The Board will be assured that professionals are delivering their statutory functions in respect of adult safeguarding</li> </ol>	









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